



## FIRST ANNUAL PROGRESS AND SERVICES REPORT TO THE 2020-2024 CHILD AND FAMILY SERVICES PLAN



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# (1) COLLABORATION AND VISION

## Responsible State Agency

The Idaho Department of Health and Welfare (IDHW) is the state agency responsible for over 30 health, welfare, and human services programs throughout Idaho. The department's mission is to actively promote and protect the health and safety of Idahoans.

The Division of Family and Community Services (FACS) is responsible for child protection, adoptions and foster care, interstate compact on the placement of children (ICPC), Indian child welfare, services for persons with developmental disabilities, resource development and eligibility, navigation services, and early intervention/screening for infants and toddlers. The Bureau of Operational Design within the division supports the development and implementation of FACS practices, including child welfare.

The Child and Family Services (CFS) program provides child protection, adoption, guardianship, foster care, ICPC and Indian child welfare services in close collaboration with other FACS Division programs. CFS' services reflect the IDHW's family-centered philosophy which affirms the belief that families should be treated with respect, involved in decision making and, when safe, are the best place for children to grow and develop. The CFS program focuses on the entire family unit and builds on family strengths while supporting and empowering families to be self-reliant and self-determining.

The CFS program is responsible for administering state title IV-E programs. As part of its title IV-E responsibility, CFS administers the funds and services of the Independent Living (IL) Program under the Chafee Foster Care Independence Act of 1999 (P.L. 106-169) and the Educational Training Voucher program. CFS also administers the Social Services Block Grant (SSBG), title IV-B parts 1 and 2 of the Social Security Act, and the CAPTA basic grant programs. The CFS program is responsible for annual reporting on the CFSP.

Outcomes of evaluations conducted by the Office of Performance Evaluation (OPE) for the Idaho Legislature combined with those from the Child and Family Services Review (CFSR) Round 3 and state-conducted Case Record Reviews (CRRs), a Comprehensive Organizational Health Assessment (COHA), and internal and external partner and stakeholder feedback, resulted in FACS making the determination larger child welfare business improvement, including the building of organizational infrastructure, was necessary to support the successful integration of CFS program goals into practice.

In May 2018, FACS began the Child Welfare Transformation (CWT) Initiative (Appendix G) to shift the CFS program towards customer centric problem solving, workflow designed solutions, operations driven leadership, and data-driven accountability. This intervention, utilizing scalable Agile planning and the integration of business practices and technology, was chosen based on the successful experiences of IDHW executive leadership implementing system-wide changes in other government programs. Organizational re-design, streamlined field-based processes, new

automation, improved court and community engagement, and increased visibility of performance are being used to create sustainable change. The CWT is a three-year plan with action goals designed to support the implementation of goals found in the 2020-2024 CFSP as well as the CFSR Program Improvement Plan (PIP).

As part of the CWT Plan, each child welfare process (i.e. safety assessment, concurrent planning, permanency planning, case management, and foster care recruitment, licensing, and support) is being re-designed and re-implemented. Continuous Quality Improvement (CQI) methods are being embedded in each re-designed process. Implementation is supported by the deployment of automated case management tools as part of the program's new Comprehensive Child Welfare Information System (CCWIS), learning experiences, post-implementation support, and performance monitoring.

## Collaboration

The Child and Family Services (CFS) program presented information regarding current performance and sought input for the First Annual Progress and Services Report (APSR) for the 2020-2024 Child and Family Services Plan (CFSP) during multiple meetings with internal and external stakeholders in the past year. Additional input was often gathered informally.

In August 2019 and January 2020, CFS program and policy specialists met with the contracted Idaho Wednesday's Child coordinator and recruitment specialist (Foster and Adoptive Parent Diligent Recruitment Plan 1.1) at national Adoption Call to Action meetings. Follow-up phone conferences and meetings were held to discuss recruitment and retention activities related to the APSR. The need to prioritize consistent messaging across adoptive and foster care recruitment efforts was identified and incorporated into the 2020-2024 Foster and Adoptive Parent Diligent Recruitment Plan (2.1). In March 2020, CFS program representatives met with other Idaho State Team members in Washington D.C. for a State Team Meeting sponsored by the Children's Bureau. Those in attendance included representatives from the state courts and the Idaho Children's Trust Fund. The State Team reviewed the state plan. In recognition Idaho is in the early stages of plan implementation, no needed changes were identified.

Additional feedback was received through ongoing collaboration with Casey Family Programs as well as IDHW programs including the Division of Behavioral Health, the Division of Medicaid, and the Infant Toddler Program. Input was sought from the Idaho Indian Child Welfare Advisory Council (ICWAC). Plans were being developed to meet with members of the Coeur d'Alene Tribe, Nez Perce Tribe, Shoshone-Bannock Tribes, and Shoshone-Paiute Tribes during the National Indian Child Welfare Association (NICWA) Conference in March 2020 to further obtain feedback; however, the conference was modified to an online platform due to COVID-19. The impact of COVID-19 on CFS and Idaho tribes resulted in challenges in meeting individually. In May 2020, a video-based meeting was held with members of the Coeur d'Alene Tribe. Feedback was received and incorporated into the APSR as reflected Goals 5 and 6. Continued efforts are being made to meet one on one with all other Idaho tribes.

CFS collaborated with internal and external partners through participation in groups whose input informed the development and implementation of the 2020-2024 CFSP and progress and changes reflected in this APSR including:

- Court Improvement Project
- Family First Prevention Services Act Visioning Council
- Guardian ad Litem Program in Idaho
- Governor's Task Force on Children at Risk
- Idaho's Citizen Review Panels
- Idaho Department of Juvenile Corrections
- Idaho Foster Youth Advisory Board
- Idaho Indian Child Welfare Advisory Council
- IDHW Division of Behavioral Health
- IDHW Division of Medicaid
- IDHW Division of Public Health
- Maternal Infant and Early Childhood Home Visiting (MIECHV) Program
- Youth Empowerment Services (YES) Project

Feedback received was consistent with input received during the development of the CFSR Program Improvement Plan (PIP) (Appendix F) and found during the OPE evaluations, CBC assessment, and COHA evaluation and highlighted concerns regarding inconsistent use of beneficial practices such as the Comprehensive Safety Assessment and concurrent planning, insufficient data, limited support for resource parents, and the use of informal engagement practices with community partners and stakeholders. This information was utilized in the development of the goals and strategies contained in the 2020-2024 CFSP.

As CFS continues implementing the 2020-2024 CFSP, collaboration continues with partners and stakeholders through participation in various groups, including those listed above. As the Division of Family and Community Services (FACS) and CFS has undergone re-organization as part of the Child Welfare Transformation (CWT) Initiative (Appendix G), the need to have a formalized, consistent process for sharing performance outcomes, identification of program strengths and areas of improvement, and development and implementation of goals and strategies for the CFSP/APSR was identified. The timely availability of quality data has been a challenge for CFS due to limitations in the Statewide Automated Child Welfare System (SACWIS). The CWT Plan addresses this challenge through the development of performance measures for re-designed child welfare processes (CWT Plan 7, 15, and 18) which were implemented concurrently with redesigned safety assessment (CFSR PIP 1.1.5; CWT Plan 2)) and concurrent planning (CFSR PIP 1.1.6; CWT Plan 3) processes. Deployment of the new Comprehensive Child Welfare Information System (CCWIS) safety assessment, case management, and permanency modules (CWT Plan 5, 12, and 16) in April 2020 has further enhanced the ability to obtain quality data. CCWIS functionality for foster care licensing as well as performance measures for permanency and foster care practices will be implemented in FFY 2020 and early FFY 2021. Through the CCWIS, CFS will create information exchanges to improve the ability to share outcomes with internal and external

partners and stakeholders (CWT Plan 6, 13, and 17). Feedback will continue to be sought and integrated into CFSP implementation and development of future APSRs.

## Vision Statement

Synergistic, inclusive collaboration to empower strong, healthy families and communities. Idaho's Vision Statement was developed at the State Team Meeting supported by the Children's Bureau in Washington, D.C. in April 2019.

## Data Dictionary

The First Annual APSR utilizes the following dates:

**Calendar Year (CY)** - the standard 12-month period beginning January 1 and ending December 31 of the specified year (i.e. CY 2019 = January 1, 2019 – December 31, 2019).

**Federal Fiscal Year (FFY)** - the 12-month period ending September 30 of the specified year and beginning October 1 of the previous year (i.e. FFY 2019 = October 1, 2018 – September 30, 2019).

**State Fiscal Year (SFY)** - the 12-month period ending June 30 of the specified year and beginning July 1 of the previous year (i.e. SFY 2019 = July 1, 2018 – June 30, 2019).

The following reviews and their findings are referenced within this report:

**Case Record Review (CRR)** – these state-conducted reviews occur on an ongoing basis and utilize the CFSR Onsite Review Instrument (OSRI). State performance for each OSRI item in FFYs 2019, 2018, and 2017 is based on CRR results from reviews conducted during the noted FFY. The CRR sample size for FFY 2019 was 100; the sample size for FFY 2018 was 79; and the sample size for SFY 2017 was 68. Sample sizes include the total number of foster care and in-home cases reviewed.

**Child and Family Services Review (CFSR) Round 3 Data Profile Context Data** – A report of Idaho's performance on each of the CFSR statewide data indicators and the result of data quality checks completed by the Children's Bureau including AFCARS and NCANDS data.

**Federal Child and Family Services Review (CFSR) Round 3** – The CFSR included a sample size of 68 cases. The case reviews were conducted between April 1, 2016 and September 30, 2016 and utilized the OSRI. State performance for each OSRI item in FFY 2016 is based on the results of the CFSR Round 3.

In addition to the CFSP, Idaho's CFS program is actively involved in several other plans designed to improve child welfare outcomes. These plans are referenced within this report:

- Child and Family Services Review Program Improvement Plan (CFSR PIP)
- Child Welfare Transformation (CWT) Plan



- Idaho Court Improvement Plan, 2019 Update (2019 CIP)
- Comprehensive Addiction and Recovery Act Program Improvement Plan (CARA PIP)

## (2) ASSESSMENT OF CURRENT PERFORMANCE IN IMPROVING OUTCOMES

### Safety Outcome 1

Children are, first and foremost, protected from abuse and neglect

#### Onsite Review Instrument (OSRI) Item 1: Timeliness of Response (Idaho CFSR PIP Goal 85.7%)

Were the agency's responses to all accepted child maltreatment reports initiated, and face-to-face contact with the child(ren) made, within time frames established by agency policies or state statutes?

Results for this item are from a count of 100% of children for whom a referral was received and assigned during the timeframe noted and no variance for child contact was given.

Table 1.1 Timeliness of Response

Year	# of Children	% Seen Timely
4/1/2019 – 3/31/2020	17,372	81.2%
4/1/2018 – 3/31/2019	18,506	83.8%
4/1/2017 – 3/31/2018	16,689	84.5%
4/1/2016 – 3/31/2017	15,646	84.3%

**CFSR 3 Data Profile Context Data: Maltreatment in Care** Of all children in foster care during a 12-month period, what is the rate of victimization, per day of care? (Maltreatment in foster care is expressed as rate per 100,000 days in care)

FFY 2017: Rate of 2.7  
 FFY 2016: Rate of 4.5  
 FFY 2015: Rate of 2.2

**CFSR 3 Data Profile Context Data: Recurrence of Maltreatment** Of all children who were victims of a substantiated or indicated maltreatment report during a 12-month period, what percent were victims of another substantiated or indicated maltreatment report within 12 months?

FFY 2017: 4.4%  
 FFY 2016: 5.8%  
 FFY 2015: 5.3%

**Strengths:** The Child and Family Services (CFS) program continues a pattern of low rates of maltreatment in care and recurrence of maltreatment as reflected in CFSR 3 Data Profile Context

Data. These indicators calculate the state's performance using all the Adoption and Foster Care Analysis and Reporting System (AFCARS) reportable cases during the specified period. The state's performance on these two standards indicates CFS is ensuring the safety of the children placed in foster care and preventing maltreatment within 12-months.

CFS has monitored the occurrence of repeat maltreatment substantiations with the implementation of revised comprehensive safety assessment (CSA) processes (CFSR PIP 1.1.5). Between April 2018 and March 2019 (11 months), 43 children experienced a repeated substantiation on a new report of maltreatment. New CSA processes were implemented statewide between April and June 2019. Between implementation and March 2020 (9 months), only 23 children experienced a repeated maltreatment substantiation. This initial data suggests implemented changes to CSA practice may be having a positive impact on the recurrence of maltreatment which, along with rates of repeated substantiation, will continue to be monitored.

**Concerns:** Despite previous attempts to fully implement the enhanced safety model statewide, a review of cases failing to meet timeliness of response and child contact requirements (Item 1) indicated unclear policies and practice standards regarding expectations for assessing all members of a family/household were negatively impacting performance on Safety Outcome 1. Inconsistent and inaccurate use of supervisory variances to extend time to see children and families are another factor.

With input from interviews with parents, children, guardians ad litem, case managers and supervisors, as well as qualitative data gathered through state-conducted Case Record Reviews (CRRs), CFS determined that not all children in a family assigned for assessment of abuse or neglect were seen within the required timeframes. The allowable time for seeing children of concern is based on the priority assigned to the report (immediately to up to five calendar days) and the timeframes for seeing all other child participants in a family is within 14 calendar days. Throughout the state, CRRs uncovered inconsistencies in identifying which children are children of concern and which children are child participants. When children were misidentified as child participants in a family, as opposed to children of concern, the agency was less likely to meet the required timeframes. Through feedback received following re-implementation of the safety assessment process it was learned child welfare social workers and supervisors were interpreting the need to see child participants within 14 days as not needing to see them earlier than 14 days. As a result, many cases were rated as areas needing improvement when CRR reviewers determined case circumstance reflected the need to see child participants earlier than 14 days. This negatively impacted the timeliness of response measured in Safety Outcome 1. As reflected in Table 1.1, Idaho is performing below the 85.7% goal established by the Children's Bureau for the Child and Family Services Review (CFSR) Program Improvement Plan (PIP).

**2021 Update and Progress:** CFS re-implemented a refined safety assessment process including the clarification of timeframes and children to be seen (CWT Plan 2) in FFY 2019. The order of re-implementation roll-out was determined by data which identified Regions 2, 3, and 5 as the lowest-performing regarding safety and permanency outcomes. Implementation in those regions is included in the CFSR PIP (1.1). To ensure statewide consistency and fidelity to the model, re-

implementation also occurred in the rest of the state, Regions 1, 4, 6, and 7. Additional information regarding the re-implementation of comprehensive safety assessment (CSA) is found under Goal 1 Strategy 1. Feedback received from regions following implementation indicated child welfare social workers and supervisors continued to struggle with ensuring child participants were seen timely which has continued to negatively impact Item 1 ratings. To further clarify child participant timeframes, the Practice Standard for Responding to Allegations of Abuse, Neglect, or Abandonment was updated in February 2020 specifying child participants should be seen within reasonable amount of time, without much delay and the timeframe should not exceed 14 calendar days.

Re-implementation of the safety assessment process was not completed until several months into the reporting period reflected in Table 1.1. Data reflecting performance as to the Timeliness of Response incorporating a full year of CSA re-implementation will be included in the 2022 Annual Progress and Services Report (APSR).

**Plan for Improvement:** CFS will continue to monitor the impact of re-implemented safety assessment processes by reviewing timeliness of response and recurrence of maltreatment data in order to identify concerns to be addressed.

## Safety Outcome 2

Children are safely maintained in their homes whenever possible and appropriate

**OSRI Item 2: Services provided to the family to protect child(ren) in the home and prevent removal or re-entry into foster care (Children's Bureau Benchmark 95%; Idaho CFSR PIP Goal N/A)** Did the agency make concerted efforts to provide services to the family to prevent children's entry into foster care or re-entry after reunification?

FFY 2019 The outcome was strength in **54%** of the cases reviewed

FFY 2018 The outcome was a strength in **72.4%** of cases reviewed

FFY 2017 The outcome was a strength in **95.0%** of cases reviewed

FFY 2016 The outcome was a strength in **90%** of the cases reviewed

**OSRI Item 3: Risk Assessment and Safety Management (Children's Bureau Benchmark 95%; Idaho PIP Goal 80%)** Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care?

FFY 2019 The outcome was a strength in **58%** of the cases reviewed

FFY 2018 The outcome was a strength in **73.4%** of cases reviewed

FFY 2017 The outcome was a strength in **77.9%** of cases reviewed

FFY 2016 The outcome was a strength in **74%** of cases reviewed

**Strengths:** Case Record Reviews (CRRs) and feedback from internal and external partners indicate Child and Family Services (CFS) performs better with initial safety assessment than with ongoing safety assessment. The safety model used by CFS has proven effective as reflected by accurate initial safety determinations. Through the guidance of the Children's Bureau, CRR teams have become more adept in their assessment of performance in Item 2 resulting in more accurate ratings.

**Concerns:** The CFS program is not meeting federal benchmarks or Child and Family Service Review (CFSR) Program Improvement Plan (PIP) goals for Safety Outcome 2. The improvement in assessment of performance by CRR teams in Item 2 has resulted in an increase in cases rated as areas needing improvement. As with Safety Outcome 1, unclear policies and practice standards regarding expectations for assessing all members of a family/household were identified as a barrier. Incomplete identification of family/household members included in the initial safety assessment resulted in services not being provided to some involved members (Item 2) and those same members not being included in ongoing safety assessment (Item 3). Available CRR data indicates additional safety-related service resources and sufficient monitoring of safety plans are needed to provide adequate services to families to protect children in the home and prevent foster care removals (Item 2). Feedback from internal and external partners as well as CRR data suggest there is insufficient and inconsistent ongoing formal and informal safety assessment and supervision has been focused primarily on initial rather than ongoing safety assessment (Item 3).

**2021 Update and Progress:** CFS re-implemented a refined safety assessment process (CFSR PIP 1.1.5; CWT Plan 2) in April 2019 which is expected to result in more accurate and consistent safety decisions. The implementation of re-designed concurrent planning processes (CFSR PIP 1.1.6; CWT Plan 3) in October 2019 incorporated enhanced safety decision making skills throughout the life of the case. A structured consultation process (CFSR PIP 1.2; CFSP 1.1) specifically addressing safety, as well as permanency and well-being, throughout the life of the case is included in the re-designed safety and concurrent planning processes. Re-implementation is being supported by learning experiences and follow-up support designed to ensure CFS social workers and supervisors have the knowledge and tools necessary to integrate the refined processes into their practice. The order of re-implementation roll-out was determined by data and prioritized the lowest-performing regions regarding safety and permanency outcomes.

The Practice Standard for Priority Guidelines in Responding to Allegations of Abuse, Neglect, or Abandonment was updated in February 2020, further clarifying timeframe requirements related to contact with child participants, as well as children of concern.

CFS program leadership continues to monitor accountability through visible data displays (CWT Plan 7 and 14) and operational reviews statewide to ensure effective implementation, ongoing performance management and evaluate the re-implementation of safety assessment and concurrent planning processes (CFSR PIP 1.1.8). Performance measures broken down by region are available in time by child welfare social workers, supervisors, regional leadership, the Child Welfare Program and Policy Development team, Bureau of Operational Design, and executive leadership. Reports for each of the CSA performance measurements (CFSR 1.1.7) continue to be

available on a visible dashboard located on IDHW's Tableau and are updated daily. An online Subway Map was made available in FFY 2020. The map is a Tableau report, updated daily, which compiles every open case and every child in care from intake to case closure and easily filters and displays case status and next steps to move the case forward with purpose. CSA and concurrent planning reports can be viewed from individual case or social worker level, supervisor level, regional level, or state level. Executive leadership began monitoring performance metrics to evaluate implementation progress and early performance and ensure process improvement and operational support with the re-implementation of the CSA process in June 2019.

**Plan for Improvement:** CFS program leadership will continue to monitor the impact of re-implemented safety assessment processes through data and operational reviews. In order to further support the ability of families to safely care for their children in their homes CFS is planning to implement additional safety services. A list of potential services has been developed and prioritized, to be implemented based on budget availability.

## Permanency Outcome 1

Children have permanency and stability in their living situations

**OSRI Item 4: Stability of Foster Care Placement (Idaho CFSR PIP Goal 85%)** Is the child in foster care in a stable placement and were any changes in the child's placement in the best interests of the child and consistent with achieving the child's permanency goal(s)?

FFY 2019 The outcome was a strength in **69.4%** of cases reviewed

FFY 2018 The outcome was a strength in **75.0%** of cases reviewed

FFY 2017 The outcome was a strength in **82.5%** of cases reviewed

FFY 2016 The outcome was a strength in **78%** of cases reviewed

**CFSR 3 Data Profile Context Data: Placement Stability** Of all children who enter care in a 12-month period, what is the rate of placement moves, per day of foster care?

19A/19B: **Rate of 5.5**

18A/18B: **Rate of 4.9**

17A/17B: **Rate of 4.3**

**OSRI Item 5: Permanency Goal for Child (Idaho CFSR PIP Goal 81%)** Did the agency establish appropriate permanency goals for the child in a timely manner?

FFY 2019 The outcome was a strength in **54.6%** of the cases reviewed

FFY 2018 The outcome was as strength in **80.9%** of cases reviewed

FFY 2017 The outcome was a strength in **82.1%** of the cases reviewed

FFY 2016 The outcome was a strength in **73%** of cases reviewed

**OSRI Item 6: Achieving Reunification, Guardianship, Adoption, or Another Planned Permanent Living Arrangement (Idaho CFSR PIP Goal 57%)** Did the agency make concerted efforts to achieve reunification, guardianship, adoption, or other planned permanent living arrangement for the child?

FFY 2019 The outcome was a strength in **35.5%** of cases reviewed

FFY 2018 The outcome was a strength in **52.1%** of cases reviewed

FFY 2017 The outcome was a strength in **58.0%** of cases reviewed

FFY 2016 The outcome was a strength in **48%** of cases reviewed

**CFSR 3 Data Profile Context Data: Permanency in 12 months** of children who entered care in a 12-month period, what percentage discharged to permanency within 12 months of entering care? (National Performance 42.7%▲)

17A/17B: **43.5%** - Idaho is statistically no different than national performance

16A/16B: **40.7%** - Idaho is statistically no different than national performance

15A/15B: **47.2%** - Idaho is statistically better than national performance

**CFSR 3 Data Profile Context Data: Permanency in 12 - 23 months** of all children in care on the first day of a 12-month period who had been in care continuously between 12 and 23 months, what percent discharged to permanency within 12 months of the first day? (National Performance 45.9%▲)

19A/19B: **52.8%** - Idaho is statistically better than national performance

18A/18B: **47.2%** - Idaho is statistically no different than national performance

17A/17B: **51.5%** - Idaho is statistically better than national performance

**CFSR 3 Data Profile Context Data: Permanency in 24+ months** of all children in care on the first day of a 12-month period who had been in care continuously for 24 months or more, what percent discharged to permanency within 12 months of the first day? (National Performance 31.8%▲)

19A/19B: **39.0%** - Idaho is statistically better than national performance

18A/18B: **40.4%** - Idaho is statistically better than national performance

17A/17B: **43.5%** - Idaho is statistically better than national performance

**CFSR 3 Data Profile Context Data: Re-entry to Foster Care** Of all children who enter care in a 12-month period, who discharged within 12 months to reunification, live with relative, or guardianship, what percent re-entered care within 12 months of their discharge? (National Performance 8.1%▼)



17A/17B: **9.2%** - Idaho is statistically no different than national performance

16A/16B: **7.3%** - Idaho is statistically no different than national performance

15A/15B: **8.4%** - Idaho is statistically no different than national performance

**Strengths:** Idaho's Child and Family Services (CFS) program improved performance related to children achieving permanency within 12 months, between 12 and 23 months, and after 24 months, as measured by in last three FFYs included in the CFSR 3 Data Profile Context Data. These indicators calculate the state's performance using all Adoption and Foster Care Analysis and Reporting System (AFCARS) reportable cases during the specified period. Internal and external partner and stakeholder feedback and Case Record Review (CRR) data suggest CFS requirements for using concurrent planning goals and dual assessments for resource parents positively support these outcomes.

Although placement stability rates have increased overall (see "Concerns"), the number of resource parents requesting a placement change due to challenges experienced managing the child's behaviors dropped from 35% in SFY 2018 to 29% in SFY 2019 suggesting efforts made towards educating resource parents on parenting children who have experienced trauma (Item 28) may be having a positive impact.

Initial data received following the implementation of revised comprehensive safety assessment (CSA) processes in July 2019 (CFSR PIP 1.1.5) suggests foster care re-entry is decreasing. Using the federal definition of foster care re-entry, CFS saw only 29 re-entries between CSA implementation and March 2020 while 83 re-entries occurred during the 12 months prior to implementation.

**Concerns:** Idaho's performance in Permanency Outcome 1 decreased during FFY 2019. Placement stability (Item 4) continued its decline from a high of 82.5% in FFY 2017 and to 69.4%. To explore the factors impacting placement stability, the CFS program analyzed the reasons placement changes occurred. During SFY 2019, the number of placement changes for children in care increased from 1,481 in SFY 2018 to 2,102. Of those, 43% were the result of a resource parent's request, a slight increase from 41% the previous year. As noted under "Strengths" a decrease was seen in the percentage of families requesting a placement change related to managing the child's behaviors. Other reasons resource families requested a child be moved were personal reasons (36%) and the result of the placement being temporary (35%). Sixty-seven placement changes occurred for "Alleged Abuse or Neglect." Cases rating as an area needing improvement (ANI) in identifying foster parent needs (Item 12C), often included resource families who were not prepared to care for the children placed in their homes, needing training in caring for children with special needs which was consistent with feedback received through post-permanency and resource parent surveys. A related theme was placement with relatives who were not prepared or did not have the capacities to meet the significant needs of their relative child. The use of temporary placements due to the lack of availability of homes also contributed to ANI ratings.



The use of concurrent planning meetings was previously effective at improving practices related to Permanency Outcome 1; however, application of consultations and concurrent planning practices was inconsistent statewide. A lack of fidelity to established concurrent planning practices was noted in findings from the Child and Family Services Review (CFSR) Round 3, CRR results, and partner and stakeholder feedback. This included inconsistent use of the safety model to re-assess safety related conditions for “return home” (which indicates a child can safely return home with appropriate safety plan and services in place); when the re-assessment did occur, the safety threats and conditions are not clearly articulated within court reports or court testimony which left court partners without a clear understanding of the underlying emerging danger issues presenting challenges to system-wide identification of when conditions to return home have been met. Likewise, it presents challenges to the identification of cases where the early pursuit of permanency through adoption or guardianship is appropriate. Previous efforts to improve the consistent use of the enhanced safety model including case consultations were not successful.

Lack of early identification and engagement of parents was identified as a common factor in cases where inappropriate permanency goals were present or timely permanency was not achieved. An in-depth analysis of cases revealed the failure to engage some parents is primarily related to CFS staff capacity. Parents (mothers and fathers) who were not immediately engaged at the onset of the case due to issues such as incarceration, active mental health or substance abuse issues, or an inability to be located, were less likely to be engaged throughout the life of the case. Lack of engagement was not due to adaptive challenges, but rather influenced by workload demands and workers not appropriately prioritizing engagement in these cases.

Permanency processes for children age three and younger were identified as an area of focus for improvement during the development of the CFSR Program Improvement Plan (PIP) through data analysis and stakeholder feedback. Children birth to five years old make up just over 31% of Idaho’s general population; however, accounted for more than 50% of the substantiated child abuse and neglect cases received in SFY 2017. This data in conjunction with legislative, community partner, and stakeholder feedback emphasizing the negative impacts to children birth to three years old when concurrent planning is not consistently practiced with fidelity has resulted in the prioritization of this age group in the need for concurrent planning and permanency re-design.

CFS is mid-way through the process of implementing process and practice changes designed to address Permanency Outcome 1. Due to the retrospective nature of CRRs, improvement in related OSRI items are not expected to be seen for one to two years. A targeted CRR assessing the efficacy of implemented changes is being planned for the next year.

**2021 Update and Progress:** Re-designed case management (CWT Plan 9) and concurrent planning processes incorporating structured Case Consultation (CFSP 1.1; CFSR PIP 1.2.1; CWT Plan 3) were implemented statewide between October and December 2019.

As part of case management re-design, psycho-social rehabilitation (PSR) workers were hired to function as case aides to case managers statewide. The first 90 days of a case were identified as

period crucial to engaging parents and relatives. PSR workers assist with relative search, complete background and social history information forms, gather documents related to the child's health and education, and complete Interstate Compact for the Placement of Children (ICPC) home study requests. Their completion of these as well as other tasks allow case managers to focus on engaging parents while ensuring necessary information vital to timely permanency is obtained.

Each Case Consultation specifically addresses safety, permanency, and well-being throughout the life of the case with specific attention to all aspects of concurrent planning including parent engagement, placement stability, the timing of home study requests, and the appropriateness of permanency goals. Quality assurance monitoring was implemented to verify Case Consultations are addressing each area.

During Case Consultations, child and resource parent needs related to placement stability are identified and plans to address them are developed. This is intended to target the 29% of placement changes related to resource parent challenges in meeting the behavioral needs of children placed in their care. Case Consultations involving children who may or are currently receiving residential treatment or experiencing other higher levels of care include additional participants such as the child's parents, relatives, facility representatives, any prospective placement resource for step-down, and the youth when over the age of 14 years. Use of this format continues for up to 90 days after the child steps-down to general or relative foster care or is reunified with parents to assure ongoing services and support to the placement to promote placement stability.

To ensure system-wide understanding of re-designed processes, a shared learning experience including CFS staff and court partners was held in 2019 (CFSR PIP 1.3; 2019 CIP-CFSR PIP III and CFSP Project 1 and Training Project 1). The curriculum was designed to improve the efficacy of communication between CFS social workers, the courts, and court partners. Information about the revised CFS safety (CFSR PIP 1.1.3) and concurrent planning (CFSR PIP 1.1.6) processes, purposes of different court hearings, court orders, and information needed by the courts to make decisions was included. To support child welfare social workers in providing quality written court testimony, updates were made to multiple court documents including reports of investigation, the Case Plan Parts 1 and 2, and permanency reports. Child welfare judges, representatives from the Administrative Office of the Courts, the Deputy Attorney General for FACS, and members of the child welfare program and policy development team and senior leadership participated in the document revisions. Draft document templates were e-mailed to child welfare judges and attorneys. Feedback received was incorporated into the finalized templates which were integrated into the shared learning curriculum. The curriculum included time for CFS, judges, and court partners to meet in county-specific groups to determine how information learned in the training would be implemented in their area. Changes to the curriculum including the revised court documents continued to be made as part of the ongoing evaluation of the learning experience (CFSR PIP 1.3.2, 1.3.4, and 1.3.6) during the roll out of the training statewide. To further support use of the new court documents, written processes were developed regarding each document, online training was provided, and a real-time frequently asked question (FAQ) session was

conducted. Participant response to the Shared Learning Experience was very positive and requests for additional opportunities were made. CFS is exploring options to provide follow-up shared learning experiences.

The program's business process design contractor, Change in Innovation (C!A), convened a workgroup in FFY 2019 to re-design permanency practices with the goals of decreasing the time to adoption (with an emphasis on children birth to three years of age), reducing the number of case transfers while maintaining quality adoption practices, and ensuring work is being completed by the correct positions (CWT Plan 4 and 14). Workgroup re-design recommendations were reviewed by the Division of Family and Community Services (FACS) leadership. Approved recommendations included: co-assignment of case management and permanency workers instead of full case transfer; co-assignment of permanency workers to focus on permanency-related needs when a primary plan of adoption or guardianship is recommended; a condensed adoption and guardianship assistance negotiation process; automatic reduction of the pre-adoptive supervision period from six months to three months for children age three and under remaining in their current placement, and use of adoptive or guardianship parent meetings to prepare families for permanency finalization. Building on the concurrent planning re-design feature of identifying an alternate permanent family for every child who remains in out of home care after six months, a goal was made to finalize adoptions within 60 days of termination of parental rights (TPR) for children in pre-adoptive placements at the time of TPR. Processes were developed outlining the responsibilities of case managers and permanency workers for co-assigned cases. Adoption and guardianship assistance processes were built into Idaho's new Comprehensive Child Welfare Information System (CCWIS) eliminating three manual documents and two steps.

Case co-assignment was implemented statewide along with concurrent planning re-design in fall 2019. Use of the new adoption and guardianship assistance processes began with the roll out of CCWIS modules in April 2020.

The permanency redesign workgroup recommended training for regional leadership regarding permanency. To meet this need, CFS worked with the Center for Adoption Support and Education to use the National Adoption Competency Child Welfare Training Initiative (NTI). All regional program managers and chiefs of social work as well as supervisors for case management, permanency, and foster care licensing and case management permanency, and licensing social workers are completing the NTI program between August and November 2020. Implementation of remaining re-designed permanency processes, including the elimination of case transfer from case managers to permanency workers, the use of adoptive and guardianship parent meetings, leadership training, and permanency finalization, was completed in August 2020 through the use of virtual training and skills labs (CWT Plan 4 and 14).

**Improvement Plan:** Post-implementation support of concurrent planning and permanency processes will continue into FFY 2021. Incorporation of knowledge gained through NTI training into practice will be supported through the completion of transfer of learning sessions to be held through December 2020.

Enhanced support of resource parents will be a focus of the implementation of re-designed resource parent training, licensing, and support beginning in FFY 2020 (CFSP PIP 2.1; CWT Plan 11 and 19). Professional Family Development Plans (PFDPs) will be an element of the overall re-design (CFSR PIP 2.2) to build on the existing skills of resource parents to enable them to care for the children placed in their home. Additional efforts will be made to recruit families able to meet the needs of children exiting or at-risk of entering residential treatment services (Foster and Adoptive Parent Diligent Recruitment Plan 2.1 and 2.2). Increased availability of resource families receiving the supports necessary to care for the children placed in their homes will improve placement stability.

Use of ongoing case consultation is expected to result in the increased application of appropriate permanency goals. Ongoing case consultations occur no less frequently than every 90 days through the life of a case and include re-assessment of safety (CFSP 1.1.5) and primary and concurrent permanency goals. Progress made in mitigating safety concerns, the identification and evaluation of relatives, and child and family permanency preferences are discussed. This will allow for earlier identification of situations where safety concerns have been mitigated and a child can be reunified as well as situations where lack of progress in alleviating safety concerns combined with a child's well-being results in the need to pursue early permanency through adoption or guardianship. Instead of waiting for the next scheduled court hearing, child welfare social workers will request court permission and/or additional hearings to begin extended home visits or change permanency goals as soon as the need is identified.

Implementation of all re-designed processes is supported by learning experiences designed to ensure CFS social workers and supervisors have the knowledge and tools necessary to integrate the refined processes into their practice and follow-up coaching and support. The order of re-implementation roll-out is determined by data and prioritizes the lowest-performing regions regarding safety and permanency outcomes. Implementation in Regions 2, 3, and 5 are captured in the CFSR PIP (1.1 and 1.2), as CFSR Round 3 data indicated they were the lowest performing regions regarding safety and permanency outcomes. Implementation in the rest of the state (Regions 1, 4, 6, and 7) is captured in the 2020-2024 CFSP (1.1).

## Permanency Outcome 2

The continuity of family relationships and connections is preserved for children

### OSRI Item 7: Placement with Siblings (Children's Bureau Benchmark 95%; Idaho PIP Goal N/A)

Did the agency make concerted efforts to ensure that siblings in foster care are placed together unless separation was necessary to meet the needs of one of the siblings?

FFY 2019 The outcome was a strength in **80.0%** of cases reviewed

FFY 2018 The outcome was a strength in **91.2%** of cases reviewed

FFY 2017 The outcome was a strength in **90.0%** of cases reviewed

FFY 2016 The outcome was a strength in **96%** of cases reviewed

**OSRI Item 8: Visiting with Parents and Siblings in Foster Care (Children's Bureau Benchmark 95%; Idaho PIP Goal N/A)** Did the agency make concerted efforts to ensure that visitation between a child in foster care and his or her mother, father, and siblings was of sufficient frequency and quality to promote continuity in the child's relationships with these close family members?

FFY 2019 The outcome was a strength in **67.4%** of cases reviewed  
 FFY 2018 The outcome was a strength in **92.1%** of cases reviewed  
 FFY 2017 The outcome was a strength in **85.3%** of cases reviewed  
 FFY 2016 The outcome was a strength in **70%** of cases reviewed

**OSRI Item 9: Preserving Connections (Children's Bureau Benchmark 95%; Idaho PIP Goal N/A)** Did the agency make concerted efforts to preserve the child's connections to his or her neighborhood, community, faith, extended family, Tribe, school, and friends?

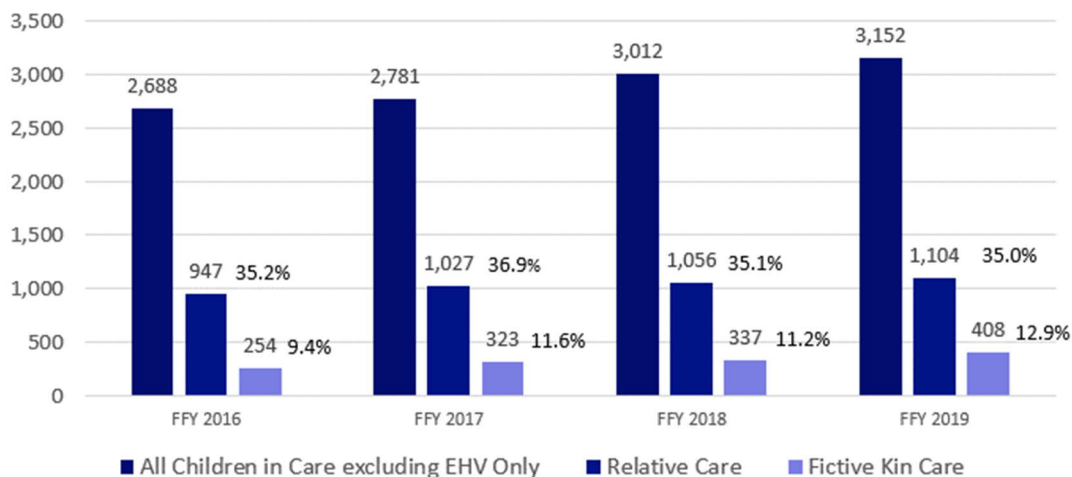
FFY 2019 The outcome was a strength in **86.9%** of cases reviewed  
 FFY 2018 The outcome was a strength in **89.4%** of cases reviewed  
 FFY 2017 The outcome was a strength in **93.0%** of cases reviewed  
 FFY 2016 The outcome was a strength in **88%** of cases reviewed

**OSRI Item 10: Relative Placement (Children's Bureau Benchmark 95%; Idaho PIP Goal N/A)**  
 Did the agency make concerted efforts to place the child with relatives when appropriate?

FFY 2019 The outcome was a strength in **83.1%** of cases reviewed  
 FFY 2018 The outcome was a strength in **83.0%** of cases reviewed  
 FFY 2017 The outcome was a strength in **92.3%** of cases reviewed  
 FFY 2016 The outcome was as a strength in **88%** of cases reviewed

Graph 10.1 Relative Placement

**Percentage of Children Placed with Relatives & Fictive Kin by Federal Fiscal Year**



**OSRI Item 11: Relationship of Child in Care with Parents (Children's Bureau Benchmark 95%; Idaho PIP Goal N/A)**

Did the agency make concerted efforts to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregivers from whom the child had been removed through activities other than just arranging for visitation?

FFY 2019 The outcome was a strength in **70.5%** of cases reviewed

FFY 2018 The outcome was a strength in **83.4%** of cases reviewed

FFY 2017 The outcome was a strength in **81.2%** of cases reviewed

FFY 2016 The outcome was a strength in **69%** of cases reviewed

**Strengths:** Idaho Code 16-1602 (38) defines relative as "a child's grandparent, great grandparent, aunt, great aunt, uncle, great uncle, brother in law, sister in law, first cousin, sibling, and half-sibling." This definition is relatively narrow in comparison to many other states excluding family members such as a parent's first cousin. Despite the limited definition, CFS has continued to perform as a strength in 83.1% of cases reviewed. Relative placement rates for all children in foster care in FFY 2019 were 35%; however, when including placement with kin, rates rose to 48%.

In FFY 2019, the Idaho Department of Health and Welfare (IDHW) completed a Border Agreement with Oregon to decrease the length of time to place children with their relatives in bordering counties. Thus far, CFS has only had one case in which the agreement applied although placement was denied due to the birth mother residing the relative's home.

**Concerns:** CFS saw a decrease in performance related to placement, visitation, and relationships with parents and siblings (Items 7, 8, and 11). An in-depth analysis of cases failing Item 8 and/or 11 over three years of Case Record Reviews (CRRs) and the CFSR Round 3 revealed the reason for failing to identify and engage parents is directly related to the amount of additional efforts necessary to engage a particular parent. The reasons additional efforts are needed varied including incarceration, active substance abuse or mental health symptoms, and out of area residence. There was no one prominent issue. Additional analysis indicated the core reason for lack of parent engagement is due to worker capacity to make the additional efforts. These findings are consistent to partner and stakeholder feedback and recent CRRs and impact findings related to Well-Being Outcome 1.

CRRs completed in FFY 2019 have noted challenges related to placement capacity within resource families resulting in their inability to accept sibling groups. Available sibling variances to increase capacity are not being pursued. Once separated, CFS has struggled to make ongoing efforts to move siblings into a shared placement or to use the Sibling Decision-Making Meeting process.

The 25% reduction in performance related to visitation with parents and siblings is reflective of the frequency and quality of visitations being inconsistent with permanency goals, specifically



when a primary goal of reunification is in place and especially in cases with younger children. Once a child is placed on an extended home visit with one parent, efforts to continue visitation with the other parent decrease. CFS has also struggled to provide adequate visitation opportunities for parents requiring supervised visits outside of normal business hours.

**2021 Update and Progress:** CFS implemented re-designed concurrent planning processes (CFSR PIP 1.1; CWT Plan 3) including structured consultation (CFSP 1.1; CFSR PIP 1.2) statewide in October 2019. Case Consultation occurs no less frequently than every 90 days throughout the life of the case and specifically addresses issues related to the engagement of parents and relatives and their relationship to the child. Quality assurance reviews and tools were built into the case consultation process to verify the necessary information is addressed during Case Consultations.

At each Case Consultation, the frequency and quality of visits as well as sibling placement and relative search and engagement are discussed. The importance of sibling placements is further emphasized by the identification of a case where siblings are separated in foster care as a “special circumstance” which requires additional consideration during consultations. Sibling visits are discussed, and plans developed to ensure they occur outside of parent/child visits on a regular basis. If siblings are not visiting, the safety or well-being concerns preventing visits are documented. Plans to meet the needs of the siblings’ resource parents related to supporting sibling visits are also developed. If the reason for sibling separation is related to systemic issues, such as a lack of foster homes, cases are escalated to field program managers. Referrals for a Sibling Placement Determination Meeting are made during consultation to assess any safety issues impacting sibling placement, the current and potential relationship between the siblings, and the well-being needs of each child. The purpose of the meeting is to determine the plan for joint sibling placement at that time as well as in the future.

In response to recommendations made by the case management re-design team, the CFS program hired psycho-social rehabilitation specialists (PSRs) who function as case aides to assist CFS social workers with the early identification and engagement of parents and relatives. To support timely engagement, PSRs access a centralized “locate unit” which uses several online and internal systems to find identified parents and relatives. Once relatives are identified, PSRs complete any paperwork necessary to request a home study through the Interstate Compact for the Placement of Children (ICPC).

**Plan for Improvement:** The impact of structured Case Consultation will continue to be monitored through data and operational reviews (CFSR PIP 1.2.6). The assessment of relatives for placement will be addressed through the implementation of revised foster care licensing processes in FFY 2021 (CWT Plan 11 and 19). In the next year, CFS plans to discuss the possible expansion of the current border agreement with Oregon to include additional counties to increase the ability to place children with their relatives more quickly.

## Well-Being Outcome 1

Families have enhanced capacity to provide for their children's needs

**OSRI Item 12: Needs and Services of Child, Parents, and Foster Parents (Idaho CFSR PIP Goal 74%)** Did the agency make concerted efforts to assess the needs of and provide services to children, parents, and foster parents to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family?

FFY 2019 The outcome was a strength in **55.21%** of cases reviewed

FFY 2018 The outcome was a strength in **68.8%** of cases reviewed

FFY 2017 The outcome was a strength in **64.7%** of cases reviewed

FFY 2016 The outcome was a strength in **68%** of cases reviewed

**OSRI Item 13: Child and Family Involvement in Case Planning (Idaho CFSR PIP Goal 78%)** Did the agency make concerted efforts to involve the parents and children (if developmentally appropriate) in the case planning process on an ongoing basis?

FFY 2019 The outcome was a strength in **55.81%** of cases reviewed

FFY 2018 The outcome was a strength in **73.2%** of cases reviewed

FFY 2017 The outcome was a strength in **67.7%** of cases reviewed

FFY 2016 The outcome was a strength in **72%** of the cases reviewed

**OSRI Item 14: Caseworker Visits with Child (Idaho CFSR PIP Goal 85%)** Were the frequency and quality of visits between caseworkers and child(ren) sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals?

FFY 2019 The outcome was a strength in **75%** of cases reviewed

FFY 2018 The outcome was a strength in **86.1%** of cases reviewed

FFY 2017 The outcome was a strength in **83.9%** of cases reviewed

FFY 2016 The outcome was a strength in **79%** of the cases reviewed

**OSRI Item 15: Caseworker Visits with Parents (Idaho CFSR PIP Goal 68%)** Were the frequency and quality of visits between caseworkers and the mothers and fathers of the child(ren) sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals?

FFY 2019 The outcome was a strength in **50.9%** of the cases reviewed

FFY 2018 The outcome was a strength in **71.0%** of cases reviewed

FFY 2017 The outcome was a strength in **60.7%** of the cases reviewed

FFY 2016 The outcome was a strength in **61%** of the cases reviewed

**Strengths:** In FFY 2019, the Child and Family Services (CFS) program had a decrease in the overall performance rating for Needs and Services of the Child, Parents, and Foster Parents (Item 12).



However, analysis of the rating for Item 12 reveals CFS remains strong in the areas of needs assessment and services to children (77.1%) and to foster parents (84.2%). Case Record Review (CRR) findings indicated CFS is effective at building strong working relationships with parents when additional engagement efforts are not necessary. When successful in engaging parents through the establishment of positive rapport, assessment of safety, risk, and participant needs was comprehensive and accurate. The quality of contacts was positively impacted through honest working relationships leading to the provision of services which accurately reflected the needs of the family, even amongst some of the most complex cases and participant needs. Data from the Statewide Automated Child Welfare Information System (SACWIS) system indicates CFS is meeting federal requirements for caseworker contacts with children, with most contacts occurring in the child's place of residence.

**Concerns:** Overall, performance ratings for Well Being Outcome 1 significantly decreased from FFY 2018 to FFY 2019. Findings from CRRs indicate failure to accurately identify all key case participants at the beginning of a case negatively impacted Items 12-15. When a key case participant was not identified, the individual was not engaged, therefore comprehensive assessment did not occur, and needed services were not provided. Notably, the performance rating for caseworker visits with parents (Item 15) was down 20.1% from the previous reporting period. Further analysis of CRR findings show CFS continues to struggle with involving parents when additional efforts are required for full engagement. While no single theme is prevalent, circumstances where additional efforts are necessary include: parents who are incarcerated, parents with active mental health or substance abuse symptoms, and parents residing in an out of area location. Other factors which contributed to the ratings decline included: investigations which remained open longer than 45 days without any continuing contact, cases where the assigned worker is no longer employed by CFS and the case record documentation was insufficient, and worker caseload and capacity.

**2021 Update and Progress:** Re-implementation of the safety assessment process including structured Safety Case Consultation was implemented statewide June 2019 (CFSP 1.1; CFSR PIP 1.1.5). Safety Case Consultation includes the early identification of all key case participants to ensure accurate and complete safety assessment. Revised case management and concurrent planning processes were implemented statewide in October 2019 (CFSR PIP 1.2.1; CWT Plan 3 and 9). In the first 30 days of a case, two meetings occur between the CFS social worker and the parents and one meeting is held between the CFS social worker, parents, and relatives/family members. These meetings will improve the early engagement of parents including the identification of parent and child needs and tasks related to case plan development. Case aides were hired to assist CFS social workers with these meetings and help support early parent and family engagement efforts. Additionally, structured Case Consultation (CFSP 1.1; CFSP PIP 1.2.1) occurs a minimum of every 90 days to address on-going safety, well-being, and permanency. A re-assessment of safety, parent engagement, and case plan progress are reviewed at each consultation. Implementation was supported by learning experiences designed to ensure CFS social workers and supervisors have the knowledge and tools necessary to integrate the refined processes into their practice. Consultation was incorporated into CFS regional performance measures monitored daily by leadership and supervisors.

Ensuring parents understand what is happening during their case is essential to engagement. During FFY 2019, parent information brochures were updated to provide easily understandable information on what to expect during their involvement with the child welfare system. In collaboration with court partners, the case plan format was revised (CFSR PIP 1.1.12) to clearly identify the conditions which must be met for a child to first return home and then what conditions must be met for the case to be closed. In the fall of 2019, CFS and court partners provided a shared learning experience for all CFS case carrying staff and court partners in each child welfare region and judicial district to promote a shared understanding of the new processes and case plan format (CFSR PIP 1.3).

**Plan for Improvement:** Enhanced assessment and support of resource parents will be a focus of the implementation of re-designed resource parent training, licensing, and support beginning in FFY 2020 (CFSP PIP 2.1; CWT Plan 11 and 19). Professional Family Development Plans (PFDPs) will be an element of the overall re-design (CFSR PIP 2.2) to build on the existing skills of resource parents to enable them to care for the children placed in their home. Implementation of these changes is anticipated to further improve performance in Item 12C. Monitoring of implementation of Case Consultations will continue through the use of visible data and performance measures (CFSP PIP 1.2; CWT 1).

## Well-Being Outcome 2

Children receive appropriate services to meet their educational needs

**OSRI Item 16: Educational Needs of the Child (Children's Bureau Benchmark 95%; Idaho PIP Goal N/A)** Did the agency make concerted efforts to assess children's educational needs, and appropriately address identified needs in case planning and case management activities?

FFY 2019 The outcome was a strength in **83.8%** of the cases reviewed

FFY 2018 The outcome was a strength in **88.2%** of cases reviewed

FFY 2017 The outcome was a strength in **95.1%** of the cases reviewed

FFY 2016 The outcome was a strength in **95%** of the cases reviewed

**Strengths:** In FFY 2019, the Child and Family Services (CFS) program moved from hard-copy files to electronic case files, stored in the CFS eCabinet. Use of CFS eCabinet has improved the ability to store and access the educational records of children involved with the child welfare program.

**Concerns:** CFS has historically performed at the Children Bureau Benchmark for Well-Being Outcome 2. The FFY 2019 rating decreased below the benchmark for the second reporting period in a row. Findings from Case Record Reviews (CRRs) indicate lack of on-going assessment of the educational needs of the child negatively impacted Item 16. CFS social workers' main source of assessment information was foster parents. Limited or no follow up with school personnel contributed to the poor quality of on-going assessment and therefore needed educational services were not provided. Other factors which contributed to the ratings decline included: investigations which remained open longer than 45 days without any continuing contact, cases where the

assigned worker is no longer employed by CFS and the case record documentation was insufficient, and worker caseload and capacity.

**2021 Update and Progress:** Beginning in the summer of 2019, case aides were hired to assist CFS social workers with obtaining educational records and ensuring they are stored in CFS eCabinet. Structured case consultation (CFSP 1.1; CFSP PIP 1.2.1) was implemented in October 2019 and include a review of a child's educational needs a minimum of every 90 days. On-going case consultation was incorporated into CFS regional performance measures monitored daily by leadership and supervisors.

**Improvement Plan:** The impact of ongoing Case Consultation will continue to be monitored by leadership and supervisors to identify any needs to be addressed.

### Well-Being Outcome 3

Children receive adequate services to meet their physical and mental health needs

**OSRI Item 17: Physical Health of the Child (Children's Bureau Benchmark 95%; Idaho PIP Goal N/A)** Did the agency address the physical health needs of children, including dental health needs?

FFY 2019 The outcome was a strength in **76.54%** of the cases reviewed

FFY 2018 The outcome was a strength in **86.7%** of cases reviewed

FFY 2017 The outcome was a strength in **86.5%** of the cases reviewed

FFY 2016 The outcome was a strength in **90%** of the cases reviewed

**OSRI Item 18: Mental/Behavioral Health of the Child (Children's Bureau Benchmark 95%; Idaho PIP Goal N/A)** Did the agency address the mental/behavioral health needs of children?

FFY 2019 The outcome was a strength in **68.49%** of cases reviewed

FFY 2018 The outcome was a strength in **78.9%** of cases reviewed

FFY 2017 The outcome was a strength in **85.7%** of cases reviewed

FFY 2016 The outcome was a strength in **84%** of cases reviewed

**Strengths:** In FFY 2019, Child and Family Services (CFS) moved from hard-copy files to electronic case files, stored in the CFS eCabinet. Use of the CFS eCabinet has improved the ability to store and access the health records of children involved with the child welfare program. CFS is partnering with the Idaho Department of Health and Welfare (IDHW)'s Children's Mental Health and Medicaid programs on issues related to meeting the mental/behavioral health needs of children involved in the child welfare program.

**Concerns:** Findings from Case Record Reviews (CRRs) indicate lack of on-going assessment of children's physical and mental/behavioral health needs negatively impacted Items 17 and 18. CFS social workers' primary source of assessment information was foster parents. Limited or no

follow up with service providers contributed to the poor quality of on-going assessment and therefore needed physical and mental/behavioral health services were not provided. Other factors which contributed to the ratings decline included: investigations which remained open longer than 45 days without any continuing contact, cases where the assigned worker is no longer employed by CFS and the case record documentation was insufficient, and worker caseload and capacity.

**2021 Update and Progress:** Case aides were hired beginning in the summer of 2019 to assist CFS social workers in obtaining background information including physical health and mental/behavioral health records for children in foster care and ensuring they are stored in CFS eCabinet. Structured Case Consultation (CFSP 1.1; CFSP PIP 1.2.1) was implemented in October 2019 and includes a review of a child's physical health, mental/behavior health, and other well-being needs a minimum of every 90 days (Health Care Oversight and Coordination Plan 1.1). Case Consultations involving children who may be placed or are currently receiving residential treatment or experiencing other higher levels of care include additional participants such as the child's parents, relatives, facility representatives, any prospective placement resource for step-down, and the youth when over the age of 14 years. Consultations continue in this format for up to 90 days after the child steps-down to general or relative foster care or is reunified with parents to assure ongoing services and supports to the child and caregiver to prevent re-entry to higher level of care.

**Improvement Plan:** On-going Case Consultation was incorporated into CFS regional performance measures and will continue to be monitored daily by leadership and supervisors. Performance plans are being implemented in lower performing areas.

## Statewide Information System

### Item 19: Statewide Information System

How well is the statewide information system functioning statewide to ensure that, at a minimum, the state can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care?

The Child and Family Services (CFS) program was found to be in substantial conformity with the Statewide Information System. The Statewide Automated Child Welfare Information System (SACWIS), iCARE, meets federal requirements for readily identifying the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care.

iCARE was initially certified as Idaho's official SACWIS system in August 2012. Subsequent Annual Operational Advance Planning Documents are submitted to the federal Division of State Systems to ensure continual compliance with federal requirements, as well as to report on the operations and maintenance of the information system.

iCARE was developed to provide CFS with a central location to securely store and access detailed information about children and families who receive services or have interacted with the agency in the past. iCARE also enables CFS to collect, analyze, and report data for internal quality assurance purposes, monitor outcomes, and track progress on improvement plans. The system is also used to report federally-mandated data for the Adoption and Foster Care Analysis and Reporting System (AFCARS), the National Child Abuse and Neglect Data System (NCANDS), and the National Youth in Transition Database (NYTD). Beginning in FFY 2020, all of the same data points will be captured in Idaho's new Comprehensive Child Welfare Information System (CCWIS) to ensure the state continues to be in substantial conformity regarding its ability to readily identify the status, demographic characteristics, location, and goals for the placement of every child who is, or has been, in foster care.

As part of the Child Welfare Transformation (CWT) Initiative, CFS began a project to modernize its statewide information system and transition from SACWIS to a federally approved CCWIS. The name given to the new system is Ensuring Safety and Permanency in Idaho (ESPI).

The first ESPI functional module was released in June 2019 (CWT Plan 12) to the Centralized Intake Unit (CIU), which serves as the initial point of contact for receiving reports of child abuse or neglect. In April 2020, additional modules were released incorporating safety assessment, case management, permanency, and post-permanency (CWT Plan 12). Modules related to foster care licensing, eligibility, foster care payments, finance, and interfaces with other state agencies will be released in November 2020 (CWT Plan 16).

Data entry into ESPI begins at the CIU, where social workers gather the child's current address and date of birth from the referring party. The social worker then accesses additional information, if available, from other state databases such as the Idaho Benefits and Eligibility System, the Idaho Service Integration system, and the Idaho Supreme Court Data Repository. This collaboration with other state information systems increases the accuracy of demographic information.

If the child abuse or neglect report gets assigned for a response, the social worker assigned to the case verifies the information available in ESPI and fills in any gaps in demographic characteristics. If the child is placed in foster care, regional administrative assistants enter any additional information available, and document the custody status of the child. The status, demographic characteristics, and location of the child are verified at the time of the initial Foster Care Reimbursement Eligibility Determination, which takes place within the first 30 days of the current foster care episode.

### **Data Quality**

The current location and placement data fields of each child who is in foster care go through a re-validation process every month by the assigned CFS social worker upon subsequent foster care reimbursement payments. Data from 2015 – 2019 (Table 19.1) shows an average of 1,276 foster care reimbursement payments per month, of those, four payments per month were considered "errors" in which the placement was not current in iCARE at the time of payment

release. This error rate translates into an average of 0.29% location and placement errors per month which indicates the location and placement of each child are accurate 99.71% of the time. After the full transition to the ESPI in November 2020, social workers, supervisors, and regional and program leadership will have access to timeliness of data entry reports on a variety of key indicators to manage the work and improve performance.

Table 19.1 iCARE Placement Error Rate

Year	Average Overpayments	Average Payments	Average Error Rate
2015	3	1,093	0.30%
2016	5	1,353	0.40%
2017	4	1,411	0.28%
2018	3	1,526	0.20%
2019	4	1,646	0.24%
Average	4	1,276	0.29%

Permanency goals and other demographic fields in iCARE have been checked monthly as an internal measure in preparation for semi-annual AFCARS submissions. This process will continue in ESPI. AFCARS Missing Data reports are sent to supervisors, regional chiefs of social work, and regional program managers. iCARE data checks in the report include Removal Episode Start Date, Removal Episode End Date, Permanency Goal Invalid/Missing, Adoption History Missing, Health/Education Evaluation Diagnosis Missing, Placement Review Overdue, Approved Placement Missing, Legal/Voluntary Status Missing, and Legal/Voluntary Status does not match Removal Date.

The AFCARS quantitative data reports for 2019A and 2019B (Table 19.2) demonstrate the system is functioning, as no element showed an error rate above 10%, the threshold for a data-quality penalty.

Table 19.2 AFCARS Error Rate

Demographic Characteristic	AFCARS 2019A Error Rate	AFCARS 2019B Error Rate
Date of Birth	0.00%	0.00%
Sex	0.00%	0.00%
Disability	0.00%	0.00%
Ever Been Adopted	0.00%	0.04%
Race	0.00%	0.10%
Ethnicity	0.25%	0.25%
Placement Goal	1.70%	1.64%



Social workers and supervisors conduct formal reviews of placement goals and general case information before the planning, six-month review, permanency, and all subsequent permanency court hearings. This process ensures the qualitative integrity of the data available in ESPI.

### **Data Scope, Limitations, and Barriers**

An exploration of the scope and limitations of available data led to questions regarding the correctness of placement information during the early stages of a case. Presently, there are no regular data integrity checks prior to the 30-day foster care reimbursement eligibility determination. This could pose a challenge in locating a child after an imminent danger removal. Data from AFCARS reports 2019B, 2019A, and 2018B indicate the average number of days between removal date and data entry date continues to be about three days. During this time, the assigned social worker, their supervisor, and a licensing worker are the primary sources of information as to the child's placement location. After the full implementation of ESPI in FFY 2021, workers will have the ability to enter placement information on mobile devices. System enhancements and expectations will be in place to reduce the amount of time from placement to data entry.

### **Improvement Plan**

Idaho met Statewide Information System requirements in CFSR Round 3. CFS contracted with Deloitte to build Idaho's new CCWIS, ESPI. The implementation of completed ESPI functions is occurring in conjunction with the implementation of revised safety, concurrent planning, case management, permanency, and foster care processes and began in June 2019 (CWT Plan 5, 12, 16, and 20). Implementation of final CCWIS modules is anticipated to occur in November 2020.

## **Case Review System**

### **Item 20: Written Case Plan**

How well is the case review system functioning statewide to ensure that each child has a written case plan that is developed jointly with the child's parent(s) and includes the required provisions?

The Case Plan Part 1 and Case Plan Part 2 (formerly known as the Family Case Plan and Alternate Care Plan) documents contain the federally-required provisions for reasonable and active efforts, appropriateness of care and placement, compelling reasons for not terminating parental rights (if applicable), education, medical, and other information important in the day-to-day care of a child placed in foster care. However, data from state conducted Case Record Reviews (CRRs) and feedback from partners and stakeholders collected during CFSR Round 3 suggest case plans are not always completed jointly with the family, making this item an area needing improvement. Currently, Child and Family Services (CFS) does not have additional aggregate data regarding family participation in case planning beyond the sample used for ongoing CRRs. Efforts to gather additional information and data for this area will be incorporated into the work Idaho is doing as part of our Child and Family Services Review (CFSR) Program Improvement Plan (PIP) to enhance our continuous quality improvement (CQI) framework (CFSR PIP 3.1.1).

There is a practice standard in operation which supports the development of case plans jointly with families and children in Idaho. The Service Planning Standard provides requirements and guidance for the development of service plans in conjunction with families and children. In October 2019, new case management processes were implemented to promote early engagement of parents and families (CWT Plan 9). Two meetings between the CFS social worker and parents and a meeting between the CFS social worker, parents, and relatives/family members are required within the first 30 days. These meetings will improve the early engagement of parents and include the identification of parent and child needs and tasks related to case plan development. Developed plans use a new case plan format which was created in collaboration with court partners (CFSR PIP 1.1.12) to clearly identify the conditions which must be met for a child to first return home and then what conditions must be met for the case to be closed.

Judicial oversight also assists in monitoring the process to ensure each child has a written case plan and the parents agree with and understand the required case plan provisions. However, family participation in the case planning process is not discussed during court proceedings. Idaho Code 16-1621 requires CFS to prepare a written case plan in every case in which a child is determined to be within the jurisdiction of the court. This section of the Idaho Child Protective Act further requires a case plan hearing within 30 days after the adjudicatory hearing. While Idaho's Administrative Office of the Courts (AOC) does not track the number of case plans received, there have been no reports of cases missing the required written case plan.

The Statewide Automated Child Welfare Information System (SACWIS) can track the timeliness of case plan entry for children who have been in care for 60 or more days (Table 20.1). Timely completion of timely Case Plan Part 1 (formerly known as the Family Case Plan) remained stable between 95.00% and 93.68% between 2017 and 2019. Meanwhile, timely completion of the Case Plan Part 2 (formerly known as the Alternate Care Plan) focusing on the child's needs and services, decreased sharply from 2016 to 2017. It improved somewhat to 60.9% in FFY 2018 and remained stable at 59.8% in 2019.

Table 20.1 Timely Plans

Children in Foster Care 60 Days or More with Timely Plans					
Plan Type	*SFY 2017	*FFY 2017	*SFY 2018	*FFY 2018	FFY 2019
Timely Family Case Plan	93.60%	95.00%	95.70%	94.9%	93.68%
Timely Alternate Care Plan	87.40%	39.70%	57.00%	60.90%	59.88%
# of Children	1061	820	798	813	718
*CFS is shifting from the use of SFY to FFY for CFSP-related reports. Both SFY and FFY numbers are represented in this table to begin this shift while still providing data over multiple years					



FFY 2019 CRR data indicated 55.81% of families actively participated in their case plans (Item 13). CFS will continue to use data from CRRs and the new Comprehensive Child Welfare Information System (CCWIS) to monitor performance in this area. Input from partners and stakeholders, as well as qualitative data from CRRs, suggest there are practice deficiencies in staff engagement with families during case plan development. A close analysis of cases failing Item 13 revealed the reasons for failing to engage parents in case planning activities include: failure to identify key case participants at the beginning of a case and the amount of additional effort necessary to engage a particular parent. The program's performance on this item continues to be an area needing improvement.

### **Data Quality, Scope, Limitations, and Barriers**

The information and data reported above was extracted from the SACWIS database and CRRs. CRR data is generated using the Onsite Review Instrument (OSRI) developed by the Children's Bureau. SACWIS reports are limited by the quality of data entry, and CRR data is limited by the margin of error associated with using population samples.

### **Improvement Plan**

Re-implementation of the safety assessment process including initial structured safety consultation was implemented statewide June 2019 (CFSR PIP 1.1.5; CWT Plan 2). Structured Case Consultation includes the early identification of all key case participants to ensure accurate and complete safety assessment. Revised case management and concurrent planning processes were implemented statewide in October 2019 (CFSR PIP 1.2.1; CWT Plan 3 and 9). This includes two meetings between the CFS social worker and the parents and a meeting between the CFS social worker, parents, and relatives/family members in the first 30 days of a case. These meetings will improve the early engagement of parents and include the identification of parent and child needs and case plan development. As Idaho continues to enhance our CQI framework (CFSR PIP 3.1.1), this area will be included to identify how additional data and information can be captured not just on the number of meetings that occur but the quality of the meetings. This will help assess if the family and child felt they were engaged in jointly developing the Case Plan Part 1 and Case Plan Part 2.

In the fall of 2019, CFS collaborated with court partners to revise the case plan format. Instead of having a "Family Case Plan" and "Alternate Care Plan," a "Case Plan Part 1" focused on goals and services for parents and "Case Plan Part 2" focused on the child's needs and services, will be used. The revised format emphasizes the conditions for the child to return home and conditions for case closure ensuring the family and courts are fully informed regarding case planning efforts and services. CFS collaborated with court partners to provide a Shared Learning Experience in each judicial district and CFS region (CFSR PIP 1.3). All local case carrying CFS staff, supervisors, and leadership as well as child welfare judges, prosecuting attorneys, deputy attorneys general, defense attorneys, and CASA attended. The Shared Learning Experience included information about the new case plan format as well as other updated documents to promote a shared understanding of the new processes.

## Item 21: Periodic Reviews

How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review?

In the Child and Family Services Review (CFSR) Round 3, statewide averages showed this item is a strength; however, individual judicial district performance varied, with some districts showing periodic reviews were not being held timely. The additional analysis conducted by the Children's Bureau determined this is an area needing improvement.

Judicial oversight is in place to ensure periodic reviews for each child occurs no less frequently than once every six months. Idaho Code 16-1622 states a hearing for review of the child's case and permanency plan, shall be held no later than six months after entry of the court's order taking jurisdiction under The Child Protective Act, and every six months thereafter.

Consistent with Idaho statute, the Idaho Administrative Office of the Courts (AOC) has measured timeliness of hearings from the date the child is removed from the home, or the date of the court's order taking jurisdiction, whichever is held first. In FFY 2019, the courts finalized implementation of their new management system which will measure timeliness based on the federal definition which begins the date of a court finding of abuse, neglect, or abandonment, or 60 days after foster care entry, whichever is first. Per the AOC, there are different practices regarding the scheduling of subsequent court hearings; some judges set all court dates at the initial hearing and others schedule one hearing at a time.

In addition to the periodic reviews conducted by the courts, Child and Family Services (CFS) also has a practice standard and process in place to ensure agency administrative case reviews are conducted for each case. The Concurrent Planning Standard states timely six-month periodic reviews and annual permanency hearings are important to achieving permanency. In preparation for these court hearings, concurrent planning or permanency meetings were held. In October 2019, CFS implemented new concurrent planning processes (CWT Plan 3) which includes ongoing structured Case Consultations (CFSR PIP 1.2.1) held a minimum of every 90 days to re-assess safety, case progress, and concurrent planning goals. Data reports showing cases overdue for a case consultation are updated daily and are used by child welfare supervisors and chiefs of social work to ensure needed consultations happen. The Concurrent Planning Standard is being updated to reflect the use of Case Consultations to prepare for review and permanency hearings.

### Data Quality, Scope, Limitations, and Barriers

The data quality, scope, limitations, and barriers for Item 21 were combined with Item 22 to improve readability. Please see Item 22 below.

### Improvement Plan

The improvement plan for Item 21 is combined with Item 22 to improve readability. Please see Item 22 below.

## Item 22: Permanency Hearings

How well is the case review system functioning statewide to ensure that, for each child, a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter?

Permanency hearings have judicial oversight. Idaho Code 16-1622(b) states that a permanency hearing shall be held no later than 12 months from the date the child is removed from the home or the date of the court's order taking jurisdiction under this chapter, whichever occurs first, and at least every 12 months thereafter, so long as the court has jurisdiction over the child.

Consistent with Idaho statute, the Idaho Administrative Office of the Courts (AOC) has measured timeliness of hearings from the date the child is removed from the home, or the date of the court's order taking jurisdiction, whichever is held first. In FFY 2019, the courts finalized implementation of their new management system which will measure timeliness based on the federal definition which begins the date of a court finding of abuse, neglect, or abandonment, or 60 days after foster care entry, whichever is first. Qualitative information available regarding barriers to timely hearings is not included in their electronic record system. However, the AOC provides select, available data to judges and Trial Court Administrators (TCAs) in each jurisdiction. The Idaho Supreme Court Child Protection Advisory Team (CPAT) and the Idaho Supreme Court Child Protection Committee (CP) receive semiannual dashboard reports with select, available data which provide aggregate child protection hearing data by district and statewide. The Data and Evaluation Department of the AOC provides additional data and support to judicial districts.

### **Data Quality, Scope, Limitations, and Barriers for item 21: Periodic Reviews, and item 22: Permanency Hearings**

Idaho's new Comprehensive Child Welfare Information System (CCWIS) has been designed to provide additional data regarding the completion of review and permanency hearings. Related modules became available in April 2020. Due to recent implementation, CCWIS hearing-related data is not yet available.

Over the last several years, Idaho Courts have launched a new statewide management system. During FFY 2019, the final wave of counties transitioned to the new system marking full adoption of the software throughout the state. The new management system enables the courts to obtain accurate data on the timeliness of review and permanency hearings. CFS and the courts continues to collaborate with the courts on a data sharing plan with the ability to share available data expected to occur in the summer of 2020.

### **Improvement Plan**

The Child and Family Services (CFS) program will continue collaborating with the courts (CWT Plan 6, 13, and 17) to develop updated measurements for timeliness of hearings. Until this year, restrictions in CFS's Statewide Automated Child Welfare Information System (SACWIS) and the court's transition to a new management system prevented the gathering of current, accurate, and

complete data related to review and permanency hearings. Idaho's focus was to improve the availability, accessibility, and quality of this data to inform any necessary improvements. With implementation of the CCWIS and the court's new management system, the focus is on gathering and analyzing the data. Timeliness measurements will now include those using the federal definition which begins the date of a court finding of abuse, neglect, or abandonment, or 60 days after foster care entry, whichever is first.

Implementation of the Idaho Court's new computer system was completed in FFY 2019 and will provide reports on the timeliness of child protection hearings (2019 CIP-CFSR PIP III and CFSP Projects 2 and 3). Improved data will enable CFS, the court system, partners, and stakeholders to accurately identify and then address barriers impacting the timely completion of review and permanency hearings. A CFS-Court Data Team (CFSR PIP 3.1.7; CWT Plan 6, 13, and 17; 2019 CIP-Data Project 1) meets at least quarterly to analyze current data to confirm the existence and identify specifics of any court-related timeliness issues. The team is in the process of determining the best methods of gathering and sharing data related to the timeliness of court hearings. As problems are identified, the team will develop a plan to address the issues.

Throughout the re-design of safety assessment (CFSR PIP 1.1; CWT Plan 2), concurrent planning (CFSR PIP 1.1; CWT Plan 3), permanency planning (CWT Plan 4 and 14), and case management processes (CWT Plan 9), performance data sets have been developed. CFS will continue to explore the possibility of the exchange of information via an interface between IDHW and the courts (CFSR PIP 1.1, 1.2, and 2.1; CWT Plan 7 and 15).

### **Item 23: Termination of Parental Rights**

How well is the case review system functioning statewide to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions?

Idaho Code 16-1622(g) states that if the child has been in the temporary or legal custody of the Idaho Department of Health and Welfare (IDHW) for 15 of the most recent 22 months, IDHW shall file, prior to the last day of the 15th month, a petition to terminate parental rights (TPR), unless the court finds:

- The child is placed permanently with a relative
- There are compelling reasons why termination of parental rights is not in the best interests of the child, or
- IDHW has failed to provide reasonable efforts to reunify the child with his family

The court may authorize the IDHW to suspend further efforts to reunify the child with the child's parent, pending further order of the court, when the court approves a permanency plan, and the permanency plan does not include a permanency goal of reunification.

There are several Child and Family Services (CFS) practice standards in operation which support the filing of TPR proceedings in accordance with the required provisions. The Concurrent Planning standard and the Paternity and Termination of Parental Rights standard both provide requirements and guidance for the filing of TPR when a child has been in foster care at least 15

out of the last 22 months, unless the court finds compelling reasons that termination is not in the best interest of the child.

CFS was not previously able to track when a court report requesting TPR was submitted or when the petition was filed. In April 2020, case management and permanency modules for Idaho's Comprehensive Child Welfare Information System (CCWIS), Ensuring Safety and Permanency in Idaho (ESPI) were implemented. Dates related to court-related tasks including the submission of a report requesting TPR by the child welfare social worker to the assigned attorney, the filing of the petition for TPR by the assigned attorney, and the TPR decision date are recorded in ESPI. This will allow for clear documentation of timeliness and deeper analysis of any identified concerns. In fall 2020, CFS expects to have functionality in place to compile this data into report form.

Currently, the available data to determine substantial conformity with TPR filing comes from the CFSR Round 3 and state conducted Case Record Reviews (CRRs). Results indicate a decrease in performance (Table 23.1). A review of the 31 cases failing to meet TPR timelines between FFY 2016 and 2019 identified all but one case as being in two regions. In FFY 2019, 69.2% of those cases were from those same two regions, while a third region had two cases, and a fourth and fifth region had one case each. Of the cases failing to meet TPR timeliness, the primary reason for failure to timely file a petition to TPR remained the failure to establish adoption as the child's primary permanency goal prior to 15 months.

Table 23.1 Timely TPR Petition Data from Case Record Reviews

Timeframe	# Cases 15 out of 22 months	# Cases other ASFA TPR Criteria	# Cases with Exception to TPR	# Applicable Cases	# Cases with TPR filed timely	% Cases with TPR filed timely
FFY 2016	14	0	2	12	10	83.3%
FFY 2017	16	1	3	14	11	78.6%
FFY 2018	25	0	6	19	10	52.2%
FFY 2019	34	1	5	30	20	66.7%

### Data Quality, Scope, Limitations, and Barriers

CFS built tracking measures in the development of the new Comprehensive Child Welfare Information System (CCWIS), which will enable for accurate and complete tracking of the TPR process (CWT Plan 5, 7, 12, 15, 16, and 18). This includes each step from the time CFS program manager approves a plan to pursue TPR, to the submission of the report requesting TPR, to the filing of the TPR petition, to the date of the court decision. In April 2020, CCWIS functionality related to case management, concurrent planning, and permanency practices were implemented. Due to recent implementation, related data is not yet available.

The court's new management system was designed to provide additional measurements related to child protection hearings. A data sharing plan between CFS and the court is being developed which is expected to result in the availability of related data in August 2020.

### **Improvement Plan**

The timely establishment of appropriate permanency goals (Item 5) is essential to the ability to timely file petitions for TPR. In May 2019, FACS leadership approved recommendations for the re-design of concurrent planning processes (CFSR PIP 1.1.6; CWT Plan 3). Implementation of the re-designed processes was completed in the fall of 2019 and included a structured consultation process (CFSP 1.1; CFSR PIP 1.2.1) which occurs no less frequently than every 90 days. Consultations specifically address the ongoing re-assessment of safety to assist in the timely identification of appropriate permanency goals and progress made on achieving those goals, including the filing of TPR petitions. The CFS program will continue collaborating with the courts to develop updated measurements for timeliness of child protection related hearings (CWT Plan 6, 13, and 17).

Until this year, restrictions in CFS's Statewide Automated Child Welfare Information System (SACWIS) and the court's transition to a new management system prevented the gathering of current, accurate, and complete data related to the filing of TPR petitions. Idaho's focus was to improve the availability, accessibility, and quality of this data to inform any necessary improvements. Now that the CCWIS and the court's new management system have been implemented, the focus is on gathering and analyzing the data. Measurements including the submission of TPR reports, filing of TPR petitions, and resulting orders will occur via the CCWIS beginning fall 2020. In combination with data obtained by the courts through their new statewide management system (2019 CIP-Data Project 2), this will allow for identification of any legal or court-related timeliness issues. The root cause of any identified issues will be explored by the CFS-Court Data Team (CFSR PIP 3.1.7; 2019 CIP-Data Project 1). The team is in the process of determining the best methods of gathering and sharing data regarding the timeliness of court hearings.

### **Item 24: Notice of Hearings and Reviews to Caregivers**

How well is the case review system functioning statewide to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child?

There are several Child and Family Services (CFS) processes and practice standards in place to provide notice of hearings and reviews to caregivers. CFS does not have a tracking system to ensure caregivers are receiving these notices, and therefore cannot produce adequate statewide data to demonstrate system functioning, which makes this item an area needing improvement. Qualitative data from Case Record Reviews (CRRs) and input from partners and stakeholders suggest there are good practices to ensure notifications are sent; however, practices are inconsistent statewide.



Idaho Juvenile Rule 40 requires notice of court hearings to be sent to any person identified as the resource parent, pre-adoptive parent, or as a relative providing care for a child who is in the custody of the Idaho Department of Health and Welfare (IDHW) after the adjudicatory hearing. It also requires notice be provided for any further hearings held with respect to the child and has a provision regarding their right to be heard. CFS has a practice standard in operation which supports the notification and involvement of caregivers in review hearings. The Resource Parent Notification of Reviews and Court Hearing Standard provides direction and guidance regarding notifying resource parents of reviews and court hearings involving children in their care. The standard outlines the requirements for providing notification to resource parents a minimum of five business days prior to a court hearing and contains guidance on encouraging them to attend and participate in the review hearings.

The Annual Resource Parent Survey conducted in the spring of 2020 gathered data regarding resource parent involvement in court hearings and their right to be heard during proceedings. The Likert Scale options for each survey item were: always, usually, sometimes, or never true. One of the questions in the survey asked if the respondent received notice prior to court hearings held concerning the child(ren) in their home. 76% of respondents indicated this was always or usually true. 14% indicated this was true sometimes, and 9% stated this was never true. Regarding their ability to provide information for court hearings and reviews, 59% indicated they attended court in person. Responses regarding court participation can be reviewed in Table 24.1.

Table 24.1 Resource Parent Survey

Statement: I am able to provide information for court hearings and reviews about the child(ren)'s status and well-being in the following ways:	SFY 2017	SFY 2018	SFY 2020
Attending court in person	68%	68%	59%
Providing information to the Caseworker	63%	63%	60%
Providing information to the Guardian ad Litem	33%	33%	41%
Writing a letter to the Court	17%	17%	22%
Providing information to the child(ren)'s attorney	16%	16%	23%
None of the Above	4%	4%	4%
Not Applicable	5%	5%	

### **Data Quality, Scope, Limitations, and Barriers**

CFS continues to be reliant upon the self-report of resource families on the Resource Parent Survey for data that reflects their notification and participation in court hearings. The next Resource Parent Survey is planned for FFY 2021.

### **Improvement Plan**

In August 2019, the Bureau of Operational Design with the support of the business process design contractor convened a workgroup to develop a consistent statewide foster care workflow to improve the experience of resource families, streamline the assessment and licensing process, and improve communication between the agency and resource parents. The approved recommendations will be implemented in fall 2020 (CFSR PIP 2.1; CWT Plan 11 and 19). These changes are anticipated to improve consistent and frequent communication to resource parents including notification of court hearings. The Idaho court's new management system includes the ability to provide additional data reflecting the engagement of resource parents in the child protection courts (2019 CIP-Data Project 2). A plan between CFS and the courts is being developed to facilitate the sharing of data. Any related information as well as qualitative feedback received during CRRs (Item 12C), will further inform ongoing assessment related to this item.

## **Quality Assurance System**

### **Item 25: Quality Assurance System**

How well is the quality assurance system functioning statewide to ensure that it is (1) operating in the jurisdictions where the services included in the CFSP are provided, (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety), (3) identifies strengths and needs of the service delivery system, (4) provides relevant reports, and (5) evaluates implemented program improvement measures?

The Child and Family Services (CFS) program is the agency responsible for the Quality Assurance System through Continuous Quality Improvement (CQI). CQI is the complete process of identifying, describing and analyzing strengths and issues and then testing, implementing, learning from, and revising solutions. It is an ongoing process which enables the agency to plan, make decisions, and evaluate progress.

The CFSR Round 3 conducted in 2016 determined CFS is not in substantial conformity with this systemic factor. Although CFS has a case record review process operating in all the areas where the services included in the Child and Family Services Plan (CFSP) are provided, additional work is needed to establish a CQI system which collects data and targets change at the regional levels.

In FFYs 2017 and 2018, CFS was evaluated by the Office of Performance Evaluation (OPE) for the Idaho Legislature. The OPE Child Welfare System Evaluation Report released in February 2017 found excessive workloads resulted in compromised performance and should be addressed by examining opportunities for efficiencies within processes, documentation, and technology.



Recommendations included formal oversight to ensure ongoing accountability, visibility, and accessibility for all child welfare partners and stakeholders. In March 2018, Child Welfare System: Reducing the Risk of Adverse Outcomes was completed by OPE. This evaluation found improved data collection methods and reporting capabilities are necessary for CFS to more efficiently analyze the data required for understanding the use and effectiveness of actions taken to prevent children from entering foster care. Improved data analysis and reporting would also enhance stakeholder collaboration. Other identified needs were improved clarity in policies and standards to address a lack of consistency.

In SFY 2018, CFS completed a CQI system self-assessment with technical assistance from the Capacity Building Center (CBC) for States. The assessment found a need for staff at all levels to receive formal, introductory, ongoing, and specialized training specific to their roles and responsibilities as it relates to CQI and to be involved in all phases of the CQI process.

### **SFY 2019 – 2021 Child Welfare Transformation (CWT) Initiative-Driven Improvements**

The Child Welfare Transformation (CWT) Initiative is a three-year effort that began in SFY 2019 (July 2018) and will conclude at the end of SFY 2021 (June 2021). This initiative aims to build Idaho's CQI structure by making both business and technology changes to improve child welfare outcomes in Idaho. Deliverables and expected outcomes are included in Table 25.1.

**Table 25.1 Child Welfare Transformation Deliverables and Expected Outcomes**

<b>Child Welfare Transformation Deliverables and Expected Outcomes</b>	
<b>Deliverable</b>	<b>Expected Outcomes</b>
Redesigned Business Processes for Safety Assessment, Case Management, and Permanency to improve effectiveness and timeliness	Fill the 55-to-75 FTE staffing gap identified in OPE's 2017 Child Welfare Report in CFS
	Improve timeliness of safety assessment decisions and documentation from 60 days to 5 days
	Decrease the average length of stay a child spends in foster care by 10 percent
CCWIS compliant, modern, and secure case management system (ESPI), in Microsoft Dynamics and Azure cloud, with case management automation, new interfaces, and remote/mobile access to case-related information	Improve safety and case management decision-making relative to statewide priorities, actionable tasks, and timeliness for courts, advocates, and families
	Improve digital document use and increase the use of complete and timely notifications to advocates and families
	Use new interfaces and provide on-demand access to information for social workers as required by federal CCWIS
Redesigned resource parent interactions including recruitment, communication, and	Give resource parents access to a new foster parent portal to read case information to support children in their care

information sharing to support children in care	Improve the experience of resource parents and realize more foster families and less foster family turnover
Improved community engagement: the courts and Idaho's Department of Education (SDE) to increase appropriate sharing of information	Use a new interface with Idaho courts and SDE to exchange information to improve CFS, court, and education responsiveness to children in their respective systems
Real-time performance management tools using ESPI and Business Intelligence (BI) software such as Tableau	Staff understand performance standards and resource management necessary to improve and maintain appropriate staffing levels to support CFS workloads

CFS uses the following components to monitor and guide statewide performance and planning:

- Staff and resource parent surveys.
- State and federal case record reviews and stakeholder interviews.
- Centralized Intake Unit record reviews.
- Indian Child Welfare Act (ICWA) Case Record Reviews.
- Independent Living Case Record Reviews and stakeholder interviews.
- Monthly, quarterly, semi-annual, and on-demand performance reports.
- Stakeholder meetings.
- Adoption and Foster Care Analysis and Reporting System (AFCARS) data indicators
- Statewide practice standards found at:  
<https://healthandwelfare.idaho.gov/Children/AdoptionFosterCareHome/ChildWelfareStandards/tabid/429/Default.aspx>
- Process documents to help social workers understand the "how-to" in completing and applying practice standards.
- Worklists in Ensuring Safety Permanency in Idaho (ESPI), Idaho's Comprehensive Child Welfare Information System (CCWIS). Workers have practice tasks lists that serve as "completion" targets that move a family case along with purpose.
- Subway Map - a Tableau report, updated daily, which compiles every open case and child in care from intake to case closure and easily filters and displays current status and next steps to move a case with purpose.
- Performance Dashboards - two Tableau reports, one for safety assessment and one for case management through permanency, that display how well the state, region, team, or individual social worker is performing towards clearly defined performance objectives.
- Accountability Storyboard - a clearly defined escalation process to ensure case tasks and performance meet key milestones. The Subway Map and Performance Dashboards provide information for escalation that is used daily to drive improvements and action from individual social workers to the deputy administrator.

- Trending Data Report - a report used at the executive level and shared with internal and external partners to identify high level changes and resources needed to meet the needs of the ever-changing population we serve. Examples of data in this report are the number of intakes received, total number of children in care, and the type of care provided over time.
- National Child Abuse and Neglect Data System (NCANDS) and National Youth in Transition Database (NYTD) reports.
- Data analyst generated reports.

### Improvement Plan

Information gathered from the two OPE evaluations, CQI Self-Assessment, data obtained during CFSR Round 3, and feedback from internal and external partners and stakeholders during the CFSR PIP development process led to the decision to shift CFS to an operational focus as outlined in the CWT Plan (Appendix G). This focus includes customer-centered problem-solving, workflow designed solutions, and data-driven accountability. All areas of child welfare practice within CFS are being re-engineered with integrated CQI processes and updated practice standards (CFSR PIP 1.1 and 3.1; CWT Plan 2, 3, 4, 9, 11, 14, and 19). As each child welfare process is re-designed, corresponding data measures and performance metrics is being defined (CWT Plan 7, 15, and 18) and gathered through ESPI (CWT Plan 5, 12, and 16), enabling timely data analysis. CQI methods are being implemented simultaneously with each re-designed process. Implementation includes transfer of knowledge to ensure child welfare staff have the information and support necessary to support CQI processes. Data and performance outcomes are made available to all levels of staff as well as external partners and stakeholders (CWT Plan 6, 7, 13, 15, 17, and 18). Corresponding internal and external feedback loops will be formalized and received feedback incorporated into process, communication, and automation changes. A re-evaluation of the purpose and necessity of regularly scheduled meetings with internal and external stakeholders is being conducted to ensure they meet the program's need for effective feedback. Completion of Child and Family Service Plan (CFSP) Goal 4 will ensure Idaho comes into compliance with the five elements of this systemic factor.

The safety, permanency, and well-being of children is a shared responsibility between the CFS program and external partners and stakeholders such as tribes, policymakers, courts, law enforcement, and community agencies; and requires collaboration with children, youth, and families. Idaho's CQI process will ensure a collaboration between the agency and stakeholders which focuses on identifying shared goals and activities and establishing a multi-system plan to guide statewide child welfare improvement efforts (CFSP 3.1).

Idaho courts have completed the implementation of a new management system which will expand their data reporting abilities. A CFS-Court Data Team (CFSR PIP 3.1.7; CWT Plan 6, 13, and 17; 2019 CIP-Data Projects 1 and 2) has been established to exchange data between CFS and the courts with the purpose of system wide data-informed decision making. The CFS-Court Data team is in the process of establishing data exchange agreements, common data points of interest, and meeting structure.

CFS will continue to use the CFSR Onsite Review Instrument (OSRI) for ongoing Case Record Reviews (CRRs). Within the next two years, CFS will build capacity to have state positions, contract positions, or combination, to form a designated team to conduct Idaho's CRR process in its entirety: reviews, initial QA, second level QA, and outcome compilation. Idaho estimates the team will consist of four full time positions.

## Staff and Provider Training

### Item 26: Initial Staff Training

How well is the staff and provider training system functioning statewide to ensure that initial training is provided to all staff who deliver services pursuant to the CFSP that includes the basic skills and knowledge required for their positions?

The Child and Family Services (CFS) program was found not in substantial conformity with this systemic factor. CFS has a robust statewide training system in place to ensure all new child welfare social workers receive the training necessary to ensure they have the basic skills and knowledge required for their positions. However, CFS does not have reliable measurement to demonstrate the effectiveness of the training after workers have completed all the new employee courses. The absence of reliable data to evaluate training effectiveness makes this item an area needing improvement.

In May 2019, Eastern Washington University (EWU) entered a contract with CFS to lead the coordination and tracking of field staff training. EWU trainers are embedded in all seven regional offices around the state. This model supports ongoing training and coaching outside of the traditional classroom setting and provides for additional expertise and knowledge from trainers while engaging in other contractual obligations. Additionally, embedded trainers provide logistical support and curriculum development for the CFS New Worker Academy. The trainers participate in reviewing curricula and meet regularly with CFS leadership to ensure the training needs of workers are met. Embedded trainers help facilitate transfer of learning activities into the field. EWU uses the Idaho Department of Health and Welfare (IDHW)'s Learning Hub management system to track training attendance and course completion. Quarterly reports are submitted by the contractor outlining in-service trainings provided, progress made on curriculum development, coaching and mentoring activities provided, completed CFS New Worker Academy sessions, participant feedback received, and total numbers of training attendees.

With supervisor feedback and worker input, embedded trainers mentor new social workers and support supervisors in their role as coaches. A New Worker Field Training Manual was developed to engage new employees with their supervisors in an on-the-job applied learning process.

All case-carrying staff are required to be licensed social workers. New Child Welfare Social Worker I's are required to complete a nine-month entrance probationary period and 13 sessions of CFS New Worker Academy, which includes synchronous and asynchronous sessions. New Child

Welfare Social Worker II's are required to complete a six-month entrance probationary period and the same 13 training sessions within that time frame. Successful completion of Academy is documented in the employee's performance evaluation within the employee appraisal database.

Child Welfare New Worker Academy training is consistently well-received by participants. During the period of May 2019 to September 2019 (five-month report), which encompassed 35 sessions and 366 of participants, ratings indicated satisfaction to the level of Agree and Strongly Agree 96% of the time.

Between the months of April and September 2019, in-service topics focused on Child and Family Service Review (CFSR) Program Improvement Plan (PIP) topics including Trauma Training, Parent-Child Visit Coaching, Trust Based Relational Intervention, Ethics of Being a Stress Resistant Practitioner, Brain Architecture, and Car Seat Training.

Child Welfare New Worker Academy sessions include foundational knowledge and skill-building activities. From May 1, 2019 to March 31, 2020, CFS offered 62 sessions of Academy on the following topics:

- Child and Family Engagement Part I & II
- Idaho Permanency Oriented Practice I-POP
- Concurrent Planning
- Working with Older Youth
- Foster Care
- Comprehensive Addictions Recovery Act (CARA)
- Every Student Succeeds Act (ESSA)
- Code X – Expedited Placement
- Foster Care Placement Changes Training
- Child Welfare: Professional Practice in a Statutory Context
- Family Centered Practice for Workers
- Legal Perspectives
- Interstate Compact on the Placement of Children (ICPC)
- Indian Child Welfare Act (ICWA)
- National Child Traumatic Stress Network's Child Welfare Trauma Training
- Knowing Who You Are
- Self-Care for Child Welfare Staff: Managing Impact of Secondary Traumatic Stress and Worker Safety
- Intake Priority Guidelines
- Service Integration
- Child Abuse and Neglect related to Domestic Violence
- Child Abuse and Neglect-Related Substance Abuse Issues
- Working with Persons (Children/Parents) with Disabilities
- Random Moment Time Study-Child Welfare IV-E Financing
- Child Welfare Eligibility and Funding
- Response to Child and Youth Human Trafficking

### **Initial Staff Training for Contractors**

CFS partners with Casey Family Programs to provide case management services to some youth ages 14-21 who live in Regions 3 or 4. They employ licensed master social workers to provide case management or supervisory responsibilities. These social workers are supported by training and supervision which focuses on applying family-centered practice principles, critical thinking skills, and trauma-informed practices. Casey Family Program's training curriculum is designed to teach a comprehensive and integrated approach to practice, ensure staff roles are well-defined, and work assignments, caseloads, and supervisory ratios are in accordance with the Council on Accreditation standards. Casey Family Programs assesses the effectiveness of their training through post-workshop evaluations. These evaluations measure the effectiveness of the learning objectives, participant's level of understanding, content clarity, the relevance of the training, and instructor effectiveness.

Casey Family Programs also provides Independent Living Services to Regions 3 and 4. Contracts are in place with community-based agencies to provide Independent Living Services such as transportation, employment, health, education, and finance. Eastern Washington University serves Regions 1 and 2, Magic Valley Youth and Adult Services serves Region 5, Bannock Youth Foundation serves Region 6, and High-Country Behavioral Health serves Region 7. CFS also has a contract with Family Connections, Inc. to provide parent coaching and other family preservation services. These agencies use their own internal programs to train their staff. They are invited, although not required to attend CFS Academy sessions.

### **Data Quality, Scope, Limitations, and Barriers**

To maintain continuous quality improvement, CFS New Worker Academy is evaluated on an ongoing basis at multiple levels using a variety of tools. These are based on participant responses to academy course evaluations, in-service course evaluations, worker academy entry and exit surveys, and pre and post knowledge checks.

### **Improvement Plan**

Participants continue to indicate being satisfied with the Academy and in-service trainings offered by EWU as demonstrated through Academy and in-service evaluations. Qualitative comments indicate the importance of supervision and face-to-face interactions with embedded trainers, lead workers, or colleagues. During FFY 2019, surveys administered to supervisors at the completion of their staff's New Worker Academy courses, indicated worker progress towards learning the necessary skills for their job role had an overall rating of "excellent."

Pre and post knowledge checks demonstrate statistically significant increases in learning and retention for the following Academy courses: Child Welfare in Statutory Context; Family Centered Practice; Family Group Decision Making; Foster Care; Indian Child Welfare Act; Idaho Permanency Oriented Practice; and Secondary Trauma and Worker Safety. CFS and EWU will continue to look at how entry and exit surveys and worker skills responses are collected to determine how to increase the information provided. Efforts are being made to develop a more robust evaluation program including evaluation of participant learning, skills, and behavior. Efforts are being made



to develop a more robust evaluation program including evaluation of participant learning, skills, and behavior.

### **Item 27: Ongoing Staff Training**

How well is the staff and provider training system functioning statewide to ensure that ongoing training is provided for staff that addresses the skills and knowledge needed to carry out their duties with regard to the services included in the CFSP?

The Child and Family Services (CFS) program's ongoing staff training system provides learning opportunities to address the skills and knowledge needed to carry out work duties. However, as with initial staff training, CFS does not have reliable measurements to assess or demonstrate the effectiveness of training. The absence of reliable data to evaluate training effectiveness makes this item an area needing improvement. Child and Family Services Review (CFSR) Round 3 results indicated CFS does not have a system for tracking compliance with ongoing training requirements.

To address this issue, enhancements were made to the Statewide Automated Child Welfare Information System (SACWIS), to track licensure compliance. A new report is generated weekly and provided to program managers highlighting lapses in staff licenses. Automated alerts are sent one-month before license expiration to individual social workers and their supervisor. Each program manager is responsible for addressing any license lapses. Design to bring this functionality to the new Comprehensive Child Welfare Information System (CCWIS) is under consideration.

The Idaho Bureau of Occupational Licenses requires social workers to complete a minimum of 20 continuing education hours each year to maintain their license. CFS offers in-service training to all employees on a quarterly basis in collaboration with the embedded Eastern Washington University (EWU) trainers. Topics of in-service trainings are based on knowledge and skills needed as identified by regional child welfare chiefs of social work, requests from regional leadership, and by the embedded trainers themselves. In-service training regarding professional ethics is offered to all employees on a semi-annual basis. Child welfare social workers update their license record in the SACWIS and are responsible for the completion of their annual continuing education hours, as well as submitting a copy of their current license to their supervisors each year.

Ongoing training topics provided during SFY 2019 included:

- Assessing Protective Capacities in Caregivers
- Ethics of a Learning Culture
- Ethics in Engagement
- Focusing Your Message
- Motivational Interviewing
- iCARE documentation: An Ethical Approach
- Child Welfare Trauma Training
- A Social Workers Guide to Ethical Decision Making
- Engaging Families through Conversational Interviewing

- Child Welfare Safety Plan Training
- Child Welfare Work and Secondary Traumatic Stress
- Ethics and Stress Resistant Worker
- Venting in the Workplace
- Ethics Incorporated
- Cultural Humility and Ethics
- Solid Social Work Ethics: Application of Family Centered Practice
- Solid Social Work Ethics: Social Media in Child Welfare

Based on feedback provided by training participants, these sessions adequately met the ongoing training needs of staff. Ongoing trainings are evaluated through pre and post knowledge checks and training evaluation forms. The evaluation of the post-knowledge checks indicates workers are receiving the skills and knowledge desired in relation to the topics presented.

Onsite embedded trainers also provide clinical support and consultation within their region. Support includes new worker transfer of learning, coaching and mentoring supervisors on supervision strategies, and staffing difficult cases in consultation with the supervisor and social worker. The total amount of time the embedded trainers spent in providing ongoing clinical support and consultation was approximately 998 hours during SFY 2019.

In addition to quarterly in-service training, the Idaho Department of Health and Welfare (IDHW) contracts with Relias Learning to provide licensed social workers with convenient, affordable access to continuing education units.

Most new child welfare supervisors are promoted within the agency and have completed the CFS New Worker Academy in their role as case-carrying staff.

All new supervisors are also required to attend supervision courses which include:

- Managing Your Workforce
- Evaluating and Managing Performance
- Crucial Accountability
- Drug-Free Workplace
- Drug Impairment Recognition for Supervisors and Managers
- Securing the Human: Information Security for Supervisors and Managers

These courses have been found to help build supervisor competence in performing their responsibilities. Supervisors also have access to IDHW's Supervisory Resource Center, allowing them to access additional supports to assist them in more effectively managing employee performance. CFS program managers and chiefs of social work meet with local human resources specialists on a quarterly basis to discuss performance issues and training needs.

Supervisory learning experiences are complimentary to Idaho's core training. Quality assurance of ongoing staff training is occurring via formalized feedback loops (CFSR PIP 1.1.3) to ensure input received from sources including partner and stakeholder meetings, Case Record Reviews (CRRs),

and multi-disciplinary teams is received and incorporated into subsequent training and implementation plans, which result in ongoing updates to the training courses offered to supervisors. Additional information regarding ongoing staff training can be found in Idaho's Title IV-E Training Matrix (Appendix D).

In addition to the required training, all child welfare leadership can attend additional training offered by human resources on topics including emotional intelligence, non-violent crisis intervention and de-escalation, crucial conversations, crucial accountability, and stress management.

### **Data Quality, Scope, Limitations, and Barriers**

Training evaluations show an enhancement in worker skill development post in-service training; however, there are concerns that these evaluations are self-reported assessments of skills and more satisfaction-based rather than a measurement of training effectiveness. CFS does have an internal procedure and guidance for performance expectations around knowledge and skills of staff, which is documented in their annual performance evaluation and upon completion of CFS New Worker Academy.

### **Improvement Plan**

Recognizing the importance of effective staff training, CFS developed the Bureau of Operational Design which includes a business process design team, a training and implementation team, and an automation team. A contract for business design support with Change in Innovation (CIA) was also initiated. As part of Idaho's Child Welfare Transformation (CWT) Initiative and CFSR Program Improvement Plan (PIP), CIA facilitated workgroups of regional child welfare social workers, supervisors, and representatives from the child welfare policy and program development team to re-design child welfare processes (CFSR PIP 1.1; CWT Plan 2, 3, 9, 11, and 14). To support social workers and supervisors in knowing how to meet their responsibilities in working with children and families, the business process design team is using approved re-design recommendations to develop written processes and leadership is identifying clear performance expectations.

The training and implementation team incorporates the written processes and performance expectations into training. As each re-designed process is rolled out, effective implementation and training processes are used to ensure all social workers and supervisors have the knowledge, skills, values, and tools necessary for their specific positions and to support the transfer of their knowledge and skills into practice. Supervisors are being provided with the knowledge, skills, values, and tools necessary to integrate the new processes into their supervision and support of caseworkers (CFSR PIP 3.2.4).

The development of a framework and plan for initial and ongoing training for current and new child welfare supervisors is included in the CFSR PIP (3.2.4). A comprehensive needs assessment to be used in the development of a leadership academy and ongoing training plan concluded in January 2020. The needs assessment process was conducted over one year and included interviews, surveys, and process meetings with the Idaho Academy Training Stakeholders and CFS Program Supervisor Workgroup. Stakeholders were comprised of CFS leadership representation

from each of Idaho's three hubs (Region 1, Region 2, Region 3 and Region 5), Central Office (FACS Training and Implementation Program Manager) and a child welfare embedded training specialist. The Idaho Child Welfare Supervisor Workgroup was made up of representation from all seven regions and included child welfare supervisors, a child welfare embedded training specialist, policy and program specialist, and a CFS program manager as a support consultant. Reference and review of literature consulted for this project included: the National Child Welfare Workforce Institute's Leadership Academy for Middle Managers (LAMM) and Leadership Academy for Supervisors (LAS); National Child Welfare Workforce Institute Competency-based Workforce Development project; Center for Public Sector Innovation Edmund S. Muskie Institute of Public Affairs at the University of Southern Maine: A competency Model for Child Welfare Supervisors; the National Adoption Competency Mental Health Training Initiative; CFS practice standards, policies, and agency guidance; CFSR Program Improvement Plan (PIP) Strategy 3.2: Implement a Competency Based Training System For CFS Program Supervisors; Idaho Legislature Office of Performance Evaluation 2017 report of the Idaho Child Welfare system; and 2018 Idaho CFS Comprehensive Organizational Health Assessment (COHA).

Needs assessment outcomes contributed to the development of the CFS Leadership Academy and Ongoing Training Plan. Through a blended/holistic approach, combining job analysis with competency modeling focused on three aspects of influencing performance (specific job tasks, characteristics of the individual performing the job, and the organizational context), CFS has developed a four-step supervisory training process using the Team Based Learning Model: (1) readiness coaching; (2) completion of the CFS Leadership Academy and Supervisor Training and Resources (STAR) curriculums; (3) post-Academy coaching and CFS Leadership Academy Field Assessments; and (4) ongoing individualized professional development and continuing education training. The updated CFS Leadership Academy is expected to be implemented early 2021.

## **Item 28: Foster and Adoptive Parent Training**

How well is the staff and provider training system functioning to ensure that training is occurring statewide for current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities (that care for children receiving foster care or adoption assistance under title IV-E) that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children?

The process to ensure prospective foster and adoptive parents receive initial training is functioning statewide. However, additional tools are needed to track the completion of ongoing training and measure the effectiveness of each learning opportunity. In the Child and Family Services Review (CFSR) Round 3, Idaho received an overall rating of area needing improvement for this item.

Eastern Washington University (EWU) was initially awarded the Child and Family Services (CFS) program's statewide resource family recruitment and retention contract in August 2016 and continued in this role through FFY 2019. Contract services include:

- Resource family recruitment and retention

- Pre-service training in Parent Resources for Information, Development, and Education (PRIDE)
- Core training
- Resource Family Training and Support Groups
- Annual Resource Family and Social Worker Conferences

New resource families receive 27 hours of initial pre-service training comprised of nine sessions using the PRIDE model. Kinship for kin care providers and Spanish sessions are available and provided as needed. The intent of PRIDE is to provide resource families with the basic knowledge and skills necessary to proceed with the foster and/or adoptive care licensing process. The nine sessions cover the following topics:

- Session One: Connecting with PRIDE
- Session Two: Teamwork Toward Permanence
- Session Three: Meeting Developmental Needs: Attachment
- Session Four: Meeting Developmental Needs: Loss
- Session Five: Strengthening Family Relationships
- Session Six: Meeting Developmental Needs: Discipline
- Session Seven: Continuing Family Relationships
- Session Eight: Planning for Change
- Session Nine: Taking PRIDE: Making an Informed Decision

Beginning in 2017 and continuing through FFY 2019, modifications were made to PRIDE sessions to update some of the training tools, videos, and layered learning activities. Trauma-informed parenting intervention through Trust Based Relational Intervention (TBRI) concepts were added, as was information from the Reasonable and Prudent Parent Standard (RPPS). Cultural humility, awareness, and education is woven throughout the pre-service training with culture specifically addressed in sessions 2, 5, 7 and 8. Pre-service training expands on “what culture is” and provides small group activities concerning race and sexual identity. In addition, EWU implemented a hybrid model of PRIDE through Foster Parent College which includes a two-hour video on cultural awareness. In June 2017, pre and post-tests were implemented to measure the effectiveness of the PRIDE curriculum. A pre-test is required at the time of registration. Post-tests are administered upon completion of a session and six months following a participant’s graduation from PRIDE. Additional data collection must occur for post-tests completed six months after the completion of PRIDE

PRIDE sessions are co-trained by professional recruiters, resource peer mentors (RPMs), and local child welfare staff. RPMs are experienced resource parents who have undergone specialized training. Trainers and RPMs reflect the diversity of Idaho and bring their own experiences related to cultural awareness from their Hispanic and Native American cultures. Trainers also receive annual training on diversity. Local child welfare leaders participate in the ninth session of PRIDE to welcome new families and provide information about communication and the grievance process. New resource families also receive schedules for additional training, support groups, and contact information for child welfare staff in their area.

All relative, fictive kin, and non-relative resource families are required to complete PRIDE training as part of the licensure process. Compliance data indicates no resource family had their foster care license revoked due to failure to complete initial training during SFY 2019. Non-relative families must complete the training before they can be licensed as resource parents. Relatives can complete the training after receiving their license if they are approved for licensure through an expedited relative and fictive kin placement, known as a Code X. Relatives and fictive kin have the option to participate in an additional kinship session of PRIDE. Participants who attend the kinship session typically give positive feedback about the training; particularly as it relates to how to work with birth parents and obtain resources.

After the initial year of licensure, CFS requires licensed families to receive 10 hours of additional training annually. This requirement also applies to families seeking to foster and/or adopt through a private child placing agency. Licensed resource parents can meet continuing education requirements through a variety of methods including support and education groups, formal training, conferences, online courses from sites such as Foster Parent College and Adoption Learning Partners, reading books, and one-on-one education from a child's treatment provider.

To achieve the vision of professionalizing resource parents and formalize ongoing training requirements, CFS will implement the Professional Resource Family and Development Plan (PFDP) initiative (CFSP 1.2; CFSR PIP 2.2). PFDPs identify key competencies, educational goals, and track resource family training progress. The plans also serve as a source of information regarding ongoing training efficacy. The plans are monitored by the family's licensing social worker during the annual re-licensure process. Plan development and monitoring is expected to enhance resource parents' capacities, as well as guide CFS decisions regarding the resources, training, and education provided to licensed families. Implementation planning, training and monitoring for workers is needed to ensure plans are completed with all families and are of sufficient quality. CFS has also developed a formal Plan of Correction template specific to licensed resource families who may be out of compliance with licensing rules.

Resource family training and support groups are offered six to seven times per year in each region. Childcare or child activities are provided at most meetings to encourage attendance. Training is provided by a range of professionals including EWU embedded trainers, CFS staff, and local treatment providers. Feedback received through the SFY 2017 Resource Family Annual survey indicated resource families are interested in training specific to trauma-informed parenting skills, identifying and understanding the needs of children in foster care, post-adoption resources, the effects of prenatal drug and alcohol exposure, supporting children in foster care and their birth parents, as well as advocating for children's educational needs. In FFY 2019, 45 training and support groups were provided across the state with 514 participants. Topics presented included Stewards of Children: Darkness to Light, Self-Care: Creating a Strategic Plan, connections, TBRI, discipline strategies, working with schools and car safety, Idaho Department of Health and Welfare (IDHW) updates and meet the program manager, Family Group Decision Making Meetings, court including meeting judges, supporting children during holidays, Operation Shield (sex trafficking), attachment, sexualized behaviors, grief and loss, community resources and using



respite care, Bottom Up Parenting: Intro to Trauma, understanding why children come into care and when they go home, Five Love Languages, ACES, teens and technology and fostering teens, allegations in the foster home, self-care, social media, and working with birth parents. Evaluations are completed inconsistently across the state. CFS will continue to work with EWU in evaluating the effectiveness of these training and support groups.

Attendance rates at resource family training and support groups continues to be lower than desired. Feedback from the 2020 Foster Parent Survey indicates that foster families are more likely to participate in and prefer online opportunities for training.

In FFY 2019, 122 participants attended six sessions of Caring for Children Who Have Been Exposed to Trauma: A Workshop for Caregivers. This curriculum was developed through the National Child Traumatic Stress Network. EWU's evaluation tools indicate the workshop is meeting training objectives by educating resource families about the impact of trauma and enhancing their knowledge and skills to parent children exposed to trauma, as well as the knowledge and support for self-care. Resource parent feedback from attendees has been positive, with participants indicating a desire for additional information about parenting children with trauma. In addition, sensory items are provided to every person in the class to support the use of these skills in the home.

After each annual Resource Family and Social Worker Conference, EWU conducts evaluations to gather feedback from attendees regarding a range of aspects of the conference, from the ease of the registration process and individual reasons for attending the conference, to the overall satisfaction with the workshops and speakers.

Following the spring 2019 conference, 169 evaluations of the 434 registered participants were returned. Over 85% of participants indicated they were satisfied with the content of the conference. In addition, 90% of participants felt like their main reason for attending the conference was fulfilled.

In April 2019, through the One Church One Child (OCOC) program, CFS provided a live webinar of the Empowered to Connect Conference by Dr. Karyn Purvis and the Texas Christian University Institute of Child Development. Each region across the state, with the assistance of OCOC, provided a conference room to air the webinar. Two locations were provided in the Region 4 area. Using TBRI methods, the training was aimed at helping resource parents, ministry leaders, and professionals, connect with children and help them heal. The training equipped attendees with a holistic understanding of their child's needs and development, while empowering them with the tools and strategies to effectively meet those needs, build trust, and help their child heal and grow. The curriculum focused on a wide range of topics and issues relevant to adoptive and resource parents helping caregivers understand the impact of their child's history, what they themselves bring to the parent-child relationship, the fundamentals of attachment, the impact of fear, and the importance of meeting their child's sensory processing, nutritional and other psychological needs. There were 374 attendees at the ten statewide locations, composed of resource parents, CFS staff, and community providers.

The 2020 Annual Resource Parent Survey was completed in March 2020 and preliminary results were provided in May 2020. More than 2,400 Idaho resource parents were sent a survey about their most recent experiences caring for children placed in their home and the services and support they received from CFS. Respondents included 637 resource parents from across the state. Seven in 10 respondents (75%) were likely to recommend foster parenting to others; and 74% evaluated the program positively, agreeing that they were well-served by the program. These proportions reflect a 5% increase in the rating for rating the program positively and a slight increase in the rating Likely to recommend foster parenting to others.

Numerous factors affect the experience of resource parents, but this survey focused on the five factors most strongly associated with parents' positive evaluations of the program.

- Factors 1 and 2: Prompt Replies from Social Workers and Timely Notification
  - 8 in 10 resource parents (81%) always or usually received a reply from their social worker within two business days
  - 76% of resource parents received timely notice of court hearings
  - Just 6% of resource parents reported contact with a social worker occurred less than once per month.
- Factors 3 and 4: Social Worker Engagement of Resource Parents and Sharing of Permanency Goals
  - 8 in 10 resource parents said the social worker worked in partnership with them
  - 7 in 10 resource parents said meetings were not scheduled without asking them
  - 6 in 10 resource parents were never caught by surprise with unexpected news about their child
  - 4 in 10 resource parents were asked to help plan the child's services at least once per month; though 1/3 were never asked
- Factor 5: Collaboration
  - Between 6 and 8 in 10 resource parents received key information about the child's history, needs, and plan, both before and during the placement
  - The majority of respondents did not receive or did not know about receipt of the following:
    - (a) Child and Family Social Medical Form
    - (b) Visitation Plan
    - (c) Resource Family Plan
    - (d) Educational Records
    - (e) Service Plan
    - (f) Independent Living Plan

The 2020 resource parent survey included questions related to training provided by the agency including what trainings were most useful, what trainings resource parents are interested in, and preference for how training is delivered. PRIDE was the most frequently accessed training by survey respondents and the trainings deemed most useful were those related to parenting traumatized children. Resource parents reported on trainings they participated in during or before becoming a foster parent. Nearly all took PRIDE, but participation in other trainings varied greatly.

- Participation rates ranged from 4 to 9 in 10, with PRIDE being most commonly taken at 93%.
- 7 to 8 in 10 of all who accessed a training rated it as useful
- Trainings rated as most useful were about parenting children who had experienced trauma (82%) and “other” topics (84%). The “other” topics will be more clearly identified as the final survey results are completed.

The training considered most needed was the same one considered most useful by those who had participated – concerning parenting traumatized children. Nearly half (47%) of foster parents wanted more training in this topic. Seven other topics attracted more than three in 10 parents. The top five: identifying children’s needs, understanding the service plan, services available for children, effects of teratogens, and post-adoption resources. Nearly one-fifth (17%) said they were not interested in any of the training topics. Overall, computer-based or webinar delivery of training was most popular, followed by in-person training. The use of “multiple methods” was next, though it eclipsed in-person training for several of the most needed topics. Only for post-adoption resources was in-person training most popular.

Results of the 2020 Resource Parent Survey show many good results with room for improvement. While there was a 29% increase in the response rate, the survey response rate was modest. Identified opportunities and next steps include:

- Raise the positive evaluation rate to 75% by improving the five top factors linked to evaluation.
- Broadly communicate the outcomes and improvement strategy to increase stakeholder engagement and future survey participation rates.
- Review current training provided to social worker regarding foster parents to identify opportunities to improve upon comments related to teamwork
- Track delivery of the Case Plan Part 2 (previously the Alternate Care Plan) in the new Comprehensive Child Welfare Information System (CCWIS).

### **Child Placing Agencies**

State licensing program specialists with the IDHW Division of Licensing and Certification license and ensure licensed child placing agencies and childcare facilities used by CFS comply with all administrative rules. Compliance is reviewed at the time of initial agency or institutional licensing and during each agency or institution’s annual re-licensing review. During FFY 2019, there were six child care agencies, 26 children’s residential care facilities, one non-accredited residential school, and one therapeutic outdoor wilderness programs licensed by IDHW Division of Licensing and Certification.

Casey Family Programs is the only private child care placing agency currently working with CFS. They licensed 22 families in Idaho during FFY 2019. The initial and ongoing training requirements of the agency currently exceed those mandated by CFS. Foster care licenses to prospective families are not issued until pre-service training is completed, which includes PRIDE and CPR/first aid. Families who do not meet ongoing education requirements at the time of re-licensure are placed on corrective action plans.

As a licensed childcare placing agency, Casey Family Programs is responsible for monitoring the completion of training requirements by their licensed families. They provide a minimum of 10 hours of individual pre-service training with each family in addition to PRIDE. The Reasonable and Prudent Parenting training is required before first placement. Non-violent Crisis Intervention training is due within 12 months of licensure. Trauma-informed caregiving training is required within 18 months of licensure. Casey Family Programs does not have the ability to issue variances or waivers. All licensing requirements must be met prior to issuing a license.

Casey Family Programs conducts Disruption Reviews when a child experiences a placement disruption from a licensed resource home. These reviews include consideration of the training received and needed by the resource family. The purpose of the review is to evaluate the quality of service provided, as well as to address future contact with the youth. Casey includes a case review component to their internal compliance review. The process includes two reviewers who meet with resource families to determine the overall quality of their experience with Casey, including a review of any training requests, how familiar they are with the scope and mission of Casey, and what they understand about the licensing process.

Through surveys and workshop evaluations, Casey reports that their licensed families feel prepared to care for the children placed in their homes. Families licensed through Casey Family Programs have access to in-house education and are invited to participate in ongoing training opportunities provided by CFS.

### **Licensed Childcare Facilities**

Childcare facilities accepting placements of children receiving IV-E foster care or adoption assistance are licensed through the IDHW's Division of Licensing and Certification. Facility employees whose primary responsibilities include interaction with children are required to complete 25 hours of initial training before they can work independently. This training must include job responsibilities, policies and procedures, emergency procedures, child safety, child abuse neglect and abandonment, CPR/first aid, and applicable agency licensing requirements.

Workers employed for 24 hours or more per week are required to receive 20 hours of ongoing annual training. Those employed for less than 24 hours per week are required to receive 10 hours of ongoing annual training. Ongoing training is required to include topics of cultural sensitivity and diversity, behavior management, and child development appropriate to the population served by their facility. Each facility is responsible for providing or arranging for their staff training. State licensing program specialists review facility completion of educational requirements during annual re-licensing visits.

During FFY 2019, four of the 30 licensed facilities were identified as not meeting initial staff training requirements for at least one new staff member. Additionally, four facilities were cited for not meeting ongoing staff training requirements. Plans of correction were developed to address the training issues. Most facilities have a limited number of deficiencies every year. There were no additional facilities found out of compliance with initial staff training requirements.

Licensing staff monitor facility training according to IDAPA 16.06.02 Child Care Licensing Regulations during the annual re-licensing survey. A sample number of employee files are audited. The sample includes new employees, long-term employees, night staff, part-time, full-time, and various staff positions. Facilities under state contract may have other staff training and/or monitoring requirements. All facilities were found in substantial compliance during FFY 2019 and were issued standard licenses. No licenses were revoked.

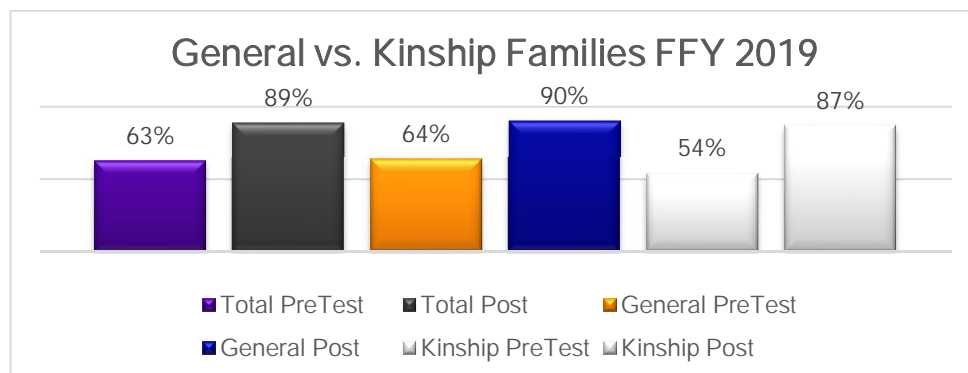
### Data Quality, Scope, Limitations, and Barriers

All data specific to resource parent initial and ongoing training is collected and maintained by EWU. The data appears to be accurate, based on self-reports and data maintained by licensing supervisors across the state.

Data regarding the timing of PRIDE training completion as it relates to the issuing of a foster care license is not available through iCARE, the Statewide Automated Child Welfare Information System (SACWIS). To obtain this information from iCARE, an audit would need to be completed. Based upon data regarding the number of PRIDE graduates and new foster care licenses issued in each hub, resource parent survey feedback, and the absence of license revocations due to training deficiencies, CFS believes families are receiving the necessary training within the required timeframe (one year following initial licensure). Based on collateral information, resource families are completing PRIDE prior to licensure or are issued a variance to complete the training within the following six months. This data is anticipated to be tracked by the new Comprehensive Child Welfare Information System (CCWIS) beginning in fall 2020. A full fiscal year set of data will be available in FFY 2021.

Administration of pre and post-tests for PRIDE pre-service training began in June 2017. The pre-test is administered at PRIDE registration. The post-tests are administered upon PRIDE graduation and six months post-graduation. Results from pre and post-tests for FFY 2019 reflect an increase in knowledge and skill development for both general and kinship families. A total of 595 in-class post-tests were taken. The response rate for the six-month post-tests continues to be low, with only 6% or 33 of the 595 individuals completed the six-month post-test. Class averages for the pre-test was 64%, in class post- test was 90% and the six-month post-test at 85%.

Table 28.1 General vs. Kinship Families FFY 2019



## Improvement Plan

Formalized statewide implementation of Professional Resource Family Development Plans (PFDPs) (CFSP 1.2; CFSR PIP 2.2) in the fall of 2020 will provide additional support to currently licensed resource families through advanced training to assist with foster parent retention efforts. CFS has added a new goal to the 2020-2024 CFSP (Goal 7) to Enhance the Professional Development of Resource Parents through Training. A contractor is being identified to complete an evaluation of the effectiveness of resource parent training (CFSP 7.1; CFSR PIP 2.1.5). Evaluation results are expected to be received in FFY 2021 and will be used to develop updates to the resource parent training plan (CFSP 7.2 and 7.3). The business design contractor will provide support for this process which will include methods to identify, track, and share data related to resource parent training (CWT Plan 12, 15, 16, and 18). Trauma training workshops and the Empowered to Connect Conference will continue to be offered. Additional information about CFS foster and adoptive parent training can be found in Idaho's Title IV-E Training Matrix (Appendix D).

## Service Array and Resource Development

### Item 29: Array of Services

How well is the service array and resource development system functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the CFSP?

1. Services that assess the strengths and needs of children and families and determine other service needs
2. Services that address the needs of families in addition to individual children in order to create a safe home environment
3. Services that enable children to remain safely with their parents when reasonable
4. Services that help children in foster and adoptive placements achieve permanency

For the Child and Family Services Review (CFSR) Round 3, the Child and Family Services (CFS) program's array of services was determined to be an area needing improvement. This determination was due, in part, to the absence of data regarding the availability and effectiveness of services statewide. Partner and stakeholder interviews conducted by the Children's Bureau during CFSR Round 3 did not indicate service array was a major issue.

Root-cause analysis and ongoing stakeholder engagement point to areas with room for improvement through continuous quality improvement (CQI) efforts. Currently, CFS is unable to produce specific data to demonstrate a functioning statewide service array and resource development system that ensures services are accessible in all service areas covered by the CFSP. While CFS can show services in all four service areas are available to some families, service gaps have been identified in rural areas including psychiatric services for children and adolescents, respite care for caregivers, independent living services, childcare, transportation,



and housing. Additionally, the timeliness and appropriateness of services in all four service areas varies by location.

There are some promising services such as permanency roundtables, a substance abuse court, and independent living services for children over 18, but these services are not readily available statewide. CFS relies heavily on the creativity of staff to provide services in rural areas of the state. Idaho is a rural state with limited access to services in areas with low population density. Access to specialized services in rural areas is particularly challenging. Increasing the quantity and quality of services requires a multi-level approach including both community organizations and other state programs.

## **1. Services that Assess the Strengths and Needs of Children and Families and Determine Other Services**

### **Casey Life Skills Assessment**

In accordance with the CFS Practice Standard for Working with Older Youth, youth who are in foster care for 90 days and are age 14 or older are eligible for Independent Living (IL) services. The specific strengths and needs of these youths must be assessed through the Casey Life Skills Assessment which is completed by the child welfare social worker with the cooperation of the youth and the youth's caregiver or resource parent. This tool assesses the youth in seven domains: Cultural and Personal Identity Formation, Supportive Relationships and Community Connections, Physical and Mental Health, Life Skills, Education, Employment, and Housing.

### **Comprehensive Safety Assessment**

In accordance with the CFS practice Standard for Comprehensive Safety, Ongoing, and Reassessment, every family receives a Comprehensive Safety Assessment (CSA) within the first 45 days by a child welfare social worker. Through the Child Welfare Transformation (CWT) Initiative redesign, the goal is to complete a case consultation within 5 days and to close assessments where there are no current safety issues. The CSA includes an analysis of the family's functioning and a safety determination for the child based on the identification of one or more of 14 safety threats. The CSA identifies safety service needs through the process of safety planning.

## **2. Services that Address the Needs of Families in Addition to Individual Children in order to Create a Safe Home Environment**

### **Family Preservation: In-Home Treatment Services**

In accordance with the CFS Practice Standard for In-Home Family Preservation Services and the Standard for Service Delivery, CFS provides services to meet the needs of families within their own homes. These services include traditional family preservation services such as in-home case management, parent coaching, delivery of parenting curriculum, psycho-education, home-making services, and in-home family counseling. In-Home treatment services may also be provided under services that enable children to remain safely with their parents when reasonable.

### Housing Services

In accordance with the CFS Practice Standard for In-Home Family Preservation Services and the Standard for Service Delivery, CFS provides services to meet the housing needs of families when these services are not available through other assistance programs. These services include emergency shelter, room and board, and payment for utilities. Housing services may also be provided under services that enable children to remain safely with their parents when reasonable.

## 3. Services that Enable Children to Remain Safely with their Parents when Reasonable

### Day Care Services

In accordance with the CFS Practice Standard for In-Home Family Preservation Services and the Standard for Service Delivery, CFS provides day care services to children both in and out of foster care when families do not qualify for state child care assistance. This enables caregivers to maintain employment or obtain educational training. Day care services may also be provided under services to create a safe home environment.

### Education and Training Services

In accordance with the CFS Practice Standard for Service Delivery and Standard for Child Well-Being, CFS provides services to meet the child's educational needs such as payment for school fees and school supplies and providing specialized tutoring. Additionally, CFS provides services for parent education to increase parents' knowledge and skills to meet their children's needs. Education and training services may also be provided under services to create a safe home environment.

### Evaluation Services

In accordance with the CFS Practice Standard for In-Home Family Preservation Services, the Standard for Service Delivery, and the Standard for Child Well Being, CFS provides psychological evaluation for both parents and children when this service is not covered by insurance or other funding options. Evaluation services may also be provided under services to create a safe home environment.

### Family Preservation Services: Clothing and Personal Care Items

In accordance with the CFS Practice Standard for In-Home Family Preservation Services and the Standard for Service Delivery, CFS provides services to meet the basic clothing and personal care needs of families and children. These services include purchasing car seats, clothing, diapers, shoes, and other needed items not covered through other funding sources. Clothing and Personal Care services may also be provided under services to create a safe home environment.

### Family Preservation Services: Crisis Intervention Services

In accordance with the CFS Practice Standard for In-Home Family Preservation Services and the Standard for Service Delivery, CFS provides services to address the needs of families in

crisis. These services include hotel lodging, family counseling, resource parent education, sibling assessment, and translation and interpretative services. Crisis Intervention services may also be provided under services to create a safe home environment.

#### Family Preservation Services: Family Meetings

In accordance with the CFS Practice Standard for In-Home Family Preservation Services, and the Standard for Service Planning, CFS provides Family Meetings for the purpose of case and service planning. Family Meetings recognize and values the importance of involving family members in decision making about children who need protection or care. Family Meetings seek the collaboration and leadership of family members in developing and implementing plans that support safety, permanency, and well-being of their children.

#### Family Preservation Services: Parent Aide Services

In accordance with the CFS Practice Standard for Service Delivery and the Standard for Visitation Between Parents, Siblings, Relatives, and Children in Out-of-Home Care, CFS provides parent aide services to families. These services include supervised/monitored parent/child visitation supervision, parent coaching, and transportation services to and from parent/child visitation.

#### Health-Medical Services

In accordance with the CFS Practice Standard for In-Home Family Preservation Services the Standard for Service Delivery, and the Standard for Child Well Being, CFS provides services to meet the health and medical needs of parents and children when these services are not covered by insurance or other funding options. These services include dental and general physician visits, paternity testing, medication, and mental health assessment and treatment. Health-Medical services may also be provided under services to create a safe home environment.

#### Respite Services

In accordance with the CFS Practice Standard for Service Delivery, CFS provides respite services for children placed in foster care or group homes.

#### Substance Abuse Services

In accordance with the CFS Practice Standard for In-Home Family Preservation Services and the Standard for Service Delivery, CFS provides substance abuse services to families when insurance or other funding sources are not available. These services include drug testing, substance abuse assessment, and out-patient and in-patient treatment. Substance abuse services may also be provided under services to create a safe home environment.

#### Transportation

In accordance with the CFS Practice Standard for In-Home Family Preservation Services and the Standard for Service Delivery, CFS provides funding for transportation services for families

when other funding sources are not available. These services include bus passes, taxi services, and gas vouchers. Transportation services may also be provided under services to create a safe home environment.

#### 4. Services that Help Children in Foster and Adoptive Placements Achieve Permanency

##### Child Specific Recruitment

Since 2007, AdoptIdaho has worked with CFS through a memorandum of understanding (MOU) to provide intensive child specific recruitment services through the grant-funded Wendy's Wonderful Kids (WWK) program. These services have been available for children with a permanency plan of adoption for whom no permanency placement has been identified. The agency elected to not continue with the grant effective June 2020. Eastern Washington University (EWU) is working with the Dave Thomas Foundation to obtain a grant to continue WWK services in Idaho.

##### Dual Assessments

Idaho resource parents receive dual assessments/home studies which approve them for both foster and adoptive care. This eliminates the need for a separate adoption home study later in a child's case thereby improving permanency timelines.

##### Idaho Wednesday's Child

Idaho Wednesday's Child is a statewide media-based child specific recruitment contract with EWU which facilitates online statewide, regional and national photo-listings of Idaho foster children in need of an adoptive placement. Available services also include professional portraits, television production, and newspaper features. Resources for prospective adoptive families are also provided on the Idaho Wednesday's Child website including information on how to obtain knowledge about the effects of childhood trauma and parenting challenges it can create.

##### Permanency Roundtables

In partnership with Casey Family Programs, Permanency Roundtables (PRTs) are available for youth in foster care who have been unable to achieve permanency. While any child in Idaho's foster care program may be referred for this service, CFS has identified children or youth with the following characteristics as priorities for receiving a PRT:

- Permanency goal of Another Planned Permanent Living Arrangement (APPLA)
- Legally free for adoption, but without an adoptive placement
- Placed in residential treatment
- Placed in foster care for more than 12 months without an identified permanent placement
- Identified by caseworkers as "difficult to place" or "stuck"

### Treatment Services

Treatment services not covered by Medicaid may be provided to address the child and/or resource family's readiness for permanency and placement stability. These services may be provided in-home or out of home.

### Wednesday's Child Waiting Families

In February 2020, the Waiting Families program was added to the Idaho Wednesday's Child contract with Eastern Washington University (EWU). The contractor actively works with prospective adoptive families seeking placement of a child from Idaho's foster care system by posting their home study on a SharePoint site easily accessible to CFS social workers. These are families who are not currently licensed by CFS but have current adoption home studies through a public agency, licensed adoption agency, or certified home study provider in any state. Consideration of families included on the site provides an opportunity for social workers to begin child-specific recruitment before using media-based efforts which is particularly helpful in cases where media-based recruitment is not appropriate. Wednesday's Child Waiting Families premiered in May 2020 with 35 families and the contractor in the process of adding 75 additional families.

### Data Quality, Scope, Limitations, and Barriers

Data related to Idaho's service array is very limited. The Statewide Automated Child Welfare Information System (SACWIS) and contract providers gives an accurate number of the families who receive services through a CFS-funded service provider. For example, CFS receives monthly reports of the number of parents and youth who are accessing substance abuse treatment funds. Accurate information as to the number of families receiving in-home family preservation services or utilizing CFS funds to pay for respite or day care are also available. The quality of the data is accurate but does not measure the appropriateness of the services provided or their effectiveness.

Data is limited to the number of families served statewide and by specific region. The SACWIS system does not have the capacity to collect or report data linking the assessment of a family's needs and strengths to services provided, nor does it have the capacity to monitor or report service provision outcomes. Services provided to families and children are most often provided by community-based agencies and contractors who have their own data collection systems, making it difficult for CFS to capture and report relevant information at this time.

### Improvement Plan

CFS identified the need to conduct further analysis on service array and gaps before proceeding with process development (CFSR PIP 3.1.5). Idaho's Family First Visioning Council (CFSP 2) simultaneously identified the need to complete a service array and gap analysis on in-home services. It was determined a single contract to conduct a service array and gap analysis regarding services available to families and children in-home and placed in foster care. The scope of work for a request for proposals is being finalized with a plan to have a contract in place in fall 2020. The Comprehensive Child Welfare Information System (CCWIS) (CWT Plan 6, 12, and 16) is being designed to communicate with other internal Idaho Department of Health and Welfare

(IDHW) and external partner programs which is expected to include information on service provision. The ability to further track service provision to children and families is being discussed with CCWIS developers. Information about the availability of needed services and gaps will also be provided through expanded partner and stakeholder engagement. Engagement processes and feedback loops will be developed related to specific child welfare practice areas. Implementation of the formalized feedback loops will be coordinated with the implementation of the related child welfare practice area.

Accurate and comprehensive assessment of the family is paramount to ensuring families are provided with the most impactful services which are both timely and effective. Assessment of children and families was addressed through the statewide re-implementation of a refined safety assessment process in July 2019. The re-designed process improves the ability of staff to identify safety-related needs throughout the life of the case (CFSR PIP 1.1; CWT Plan 2). Statewide implementation of ongoing Case Consultation through revised concurrent planning processes (CFSP 1.1; CFSR PIP 1.2.1) was completed in December 2019. Case Consultations address the safety, permanency, and well-being needs of children and their parents through the life of a case further improving the identification and addressing of needs. As part of implementation of the comprehensive safety assessment and concurrent planning re-design, clarification of policies and processes necessary to accurately identify and document the needs of children and families was completed. Parents meet with their assigned case manager within 15 days of their child's assessment as unsafe. One explicit purpose of this meeting is for the case manager to gather information about the parent and child's mental and behavioral health, physical health, financial needs, substance abuse needs, and educational needs. If information is unable to be gathered at the initial meeting, a second is held. Family meetings are held within 45 days of the child's assessment as unsafe and allow for identification of needs and case plan development.

### **Item 30: Individualizing Services**

How well is the service array and resource development system functioning statewide to ensure that the services in item 29 can be individualized to meet the unique needs of children and families served by the agency?

While individualized services are provided to meet the unique needs of children and families in Idaho, Child and Family Services (CFS) does not currently have enough services statewide, particularly in rural areas, and there is not enough data and information to measure the availability and accessibility of services. For the Child and Family Services Review (CFSR) Round 3, this item received an overall rating of area needing improvement.

Meeting the individualized needs of children and families is an ongoing challenge with the inconsistency of community-based supports throughout Idaho's communities. Services provided to children and families are difficult to capture in quantitative data due to Statewide Automated Child Welfare Information System (SACWIS) limitations and multiple funding streams. CFS utilizes a Family Centered Practice approach in all interactions with children and families. Reports from



partners, stakeholders, and local offices reflect that social workers are striving to meet the unique needs of Idaho's children and families.

Idaho's CFS program is working to modernize the child welfare information system, including enhancing the program's technology platform and related software applications to support the delivery of child welfare services in the most cost-effective and time-sensitive manner.

### **Data Quality, Scope, Limitations, and Barriers**

As stated above, there is currently not enough data and information to measure CFS's ability to individualize services to meet the needs of children and families served by the program. There is insufficient data on the statewide availability and accessibility of services that are developmentally and/or culturally appropriate and responsive to persons with disabilities or special needs.

### **Plan for Improvement**

Accurate and comprehensive assessment of individuals is essential to ensuring each person receives timely and effective services to meet those needs. In June 2019, a revised safety assessment process (CFSR PIP 1.1.5; CWT Plan 2) was implemented statewide improving the ability of CFS staff to identify safety-related needs. In October 2019, redesigned concurrent planning (CFSP PIP 1.1.6; CWT Plan 3) and case management processes (CWT Plan 9) were implemented statewide using ongoing Case Consultation (CFSP 1.1; CFSR PIP 1.2) to address safety, permanency, and well-being resulting in the further improvement of the individualization of services to meet the specific needs of a child and family. The revised processes require CFS social workers to meet with parents twice and with parents along with their relatives and family members once during the first 30 days of the case. During these meetings, social workers, parents, and relatives work together to identify the individual needs of the parents and children.

CFS intends to further improve the identification and meeting of a child and family's individualized needs through community providers and/or contractors using the Child and Adolescent Needs and Strengths (CANS) tool. CANS will be used to assess children in foster care with placement needs greater than general foster care. The tool assesses the child's mental health and trauma-related needs.

Better identification of service needs combined with corresponding enhanced data collection methods through the development of the Comprehensive Child Welfare Information System (CCWIS) will improve the ability of CFS to identify specific safety services and gaps. The new CCWIS system will include the ability to connect a child or parent's identified needs with services provided, thus allowing CFS to gather data as to the provision of individualized services to families. Data collection specific to identified needs and the services received will enhance the ability of CFS to identify and address services gaps. Information about the availability of needed services and gaps will also be provided through expanded partner and stakeholder engagement. Engagement processes and feedback loops will be developed related to specific child welfare practice areas. Implementation of the formalized feedback loops will be coordinated with the implementation of the related child welfare practice area.

## Agency Responsiveness to the Community

### Item 31: State Engagement and Consultation with Stakeholders Pursuant to CFSP and APSR

How well is the agency responsiveness to the community system functioning statewide to ensure that in implementing the provisions of the CFSP and developing related APSRs, the state engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP?

In the Child and Family Services Review (CFSR) Round 3, the Child and Family Services (CFS) program's engagement with stakeholders was determined to be an area needing improvement. Although the agency gathers input initially from partners and stakeholders to develop goals and objectives for the Child and Family Services Plan (CFSP), there is not sufficient and ongoing consultation regarding the implementation and annual updates of CFSP goals and objectives. The engagement of partners and stakeholders has, at times, been viewed as a "separate" process from ongoing work functions which has had a negative impact on performance in this area.

In FFY 2019, CFS focused on using existing partner and stakeholder structures such as the Family First Visioning Council (CFSP 2), CFS-Court Data Team (CFSR PIP 3.1.7), Court Improvement Committee, and Indian Child Welfare Advisory Council (ICWAC) in addition to national meeting opportunities including the State Team Meeting and Adoption Call to Action to gather feedback about the CFSP which has been implemented into this APSR. Topics including CFSP goals, progress, and challenges have been specifically included on meeting agendas. Feedback received from child protection judges, attorneys, and courts was incorporated into the implementation of Case Consultations (CFSP 1.1; CFSR PIP 1.2.1) and concurrent planning processes (CWT Plan 3) through the revision of court document templates. Resource Parent Survey responses and feedback from Resource Peer Mentors (RPMs), recruitment and retention contractors, resource parent trainers, as resource parents during Case Record Reviews (CRRs) resulted in the identification of the need for Professional Resource Family Development Plans (PRFDPs) (CFSP 1.2).

#### Data Quality, Scope, Limitations, and Barriers

Data on the effectiveness of the impact of CFS engagement with stakeholders pursuant to the CFSP and APSR is limited to the identification of goals and activities developed and/or implemented in partnership with stakeholders.

**Improvement Plan:** The CFS program will implement re-designed permanency (CWT Plan 4 and 14) and foster care licensing and recruitment (CWT Plan 11 and 19) processes in the summer and fall of 2020. The re-design and implementation process will be used as an opportunity to embed ongoing partner and stakeholder engagement and feedback (CFSP 3 and 4). The formalization and operationalization of stakeholder feedback loops are being incorporated as part of integrating

CQI within each of these processes (CWT Plan 6, 13, and 17). Feedback received will be incorporated into program processes, communication, and automation changes.

To further support the ongoing engagement of partners, 2020-2024 CFSP Goal 3 (2019 CIP-CFSR PIP III and CFSP Project 4) focuses on the convening of a multi-program system-wide meeting to identify cross-cutting issues, such as the accessibility of quality services, which are barriers to system-wide child welfare improvements in Idaho. Feedback and/or plans developed as result of this meeting will be reflected in future APSRs. CFS is also partnering with multiple internal and external partners and stakeholders in the development of primary prevention services (CFSP 2; 2019 CIP-Family First Prevention and Services Act Project 1).

### **Item 32: Coordination of CFSP Services with Other Federal Programs**

How well is the agency responsiveness to the community system functioning statewide to ensure that the state's services under the CFSP are coordinated with services or benefits of other federal or federally assisted programs serving the same population?

In the Child and Family Services Review (CFSR) Round 3, the Child and Family Services (CFS) program received an overall rating of area needing improvement for this item. Limited data is available to demonstrate the impact on services or benefits received by children and families served by CFS and other federal programs serving the same population.

#### **Medicaid**

The Child Welfare Funding Team (CWFT) within CFS coordinates with the Idaho Department of Health and Welfare (IDHW) Division of Medicaid's Self Reliance program to authorize enhanced Medicaid benefits to foster youth who are not receiving Medicaid at the time they enter foster care. If a foster youth is receiving Medicaid at the time they enter foster care, the CWFT collaborates with Self Reliance to close regular Medicaid and begin coverage under the enhanced Medicaid plan available to youth in foster care.

Foster youth placed in Idaho from another state through the Interstate Compact on the Placement of Children (ICPC) are supported by the CWFT to obtain title IV-E Medicaid benefits, when eligible, or state-funded Medicaid benefits depending on the placement (licensed foster home or treatment facility). The CWFT also assists families with adoption assistance agreements in place from other states who move to Idaho in establishing Idaho Medicaid.

The IDHW Division of Medicaid is also coordinating with CFS through participation on the Visioning Council for the development of the Idaho Family First Pre-Implementation Plan in accordance with the Family First Prevention Services Act (CFSP 2.1 and 2.2).

#### **Housing Authority**

There are several programs within the state to help families in need of low-income housing. These programs include the Idaho Housing Authority, the Families First Program, the Housing Choice

Voucher Program, the South-Eastern Idaho Community Action Agency, and the Boise City/Ada County Housing Authority. These programs serve families with children under 18, the elderly, and/or the disabled, who meet income requirements. CFS collaborates with these programs to help youth who have aged out of foster care obtain stable housing and reduce homelessness within this population. CFS also collaborates with these programs to secure housing for families whose current living arrangements pose a safety risk for children or whose housing conditions are preventing reunification.

### Child Support

The IDHW's Bureau of Child Support and CFS are working together to establish a new process on the identification of fathers and child support orders.

### Temporary Assistance to Needy Families (TANF)

Title IV-E eligibility and TANF eligibility for children placed with permanent guardians or relatives is coordinated with the TANF program.

### Idaho Department of Education

Collaboration between CFS and the Idaho Department of Education is critical to the development of educational services for youth in foster care and to coordinate potential Early Head Start and Head Start placements for children in state custody.

Recognizing the critical need for educational and child welfare agencies to partner together to provide educational stability for children in care, new requirements were put into place in FFY 2017 by the federal Every Student Succeeds Act (ESSA). Through these partnerships, greater stability for children in foster care is promoted and supported so children in care can continue their education without disruption, maintain critical relationships with their peers and adults, and have the opportunity to achieve college and career-readiness, as well as an overall enhanced well-being. ESSA also applies to preschool-age children in foster care who receive a public preschool education provided by a local education agency. Educational stability for students in foster care has been a priority for CFS and the agency has continued its ongoing collaborative with local schools.

To comply with ESSA provisions, CFS implemented the following items:

- Collaboration with the State Department of Education to provide joint training
- Enhancement of iCARE to automatically notify designated points of contact within the school and State Department of Education when a child has come into foster care or had a placement change
- Designate state and regional points of contact

The Statewide Automated Child Welfare Information System (SACWIS) team worked diligently to create a more streamlined process to share information between CFS, the State Department of Education, and appropriate school districts. CFS continues to work in close collaboration with the

State Department of Education, local education agencies, resource parents, and biological parents throughout the state to ensure educational stability for children in care.

### Other Federal Programs

Additional collaboration with other federal programs can be found within several sections of this report:

- Infant-Toddler Program (ITP): Service Description
- Resource and Service Navigation Program: Service Description
- Maternal, Infant, and Early Childhood Home Visiting Program: Service Description
- Employment: Chafee Independence Living Program
- Idaho State Board of Education: Chafee Independence Living Program
- Homeless Prevention: Chafee Independence Living Program
- Foster Youth Pregnancy Prevention: Chafee Independence Living Program

### Data Quality, Scope, Limitations, and Barriers

There is limited data and information to demonstrate the impact of CFS's coordination with other federal programs on the services or benefits received by children and families served across agencies and programs.

CFS will continue to enhance the data collection system to identify collaboration gaps and inform coordination efforts to improve outcomes for children and families who qualify for additional federally-funded services available in the state.

### Improvement Plan

CFS is focused on improving our data collection system to better inform coordination efforts with federally-funded programs. In FFY 2019, CFS began building Idaho's Comprehensive Child Welfare Information System (CCWIS). Exploration of the ability to improve automation between systems of various federally and state-funded programs to allow for the improved sharing of data and information occurred as part of CCWIS development. The new CCWIS includes the ability to connect a child or parent's identified needs with services provided, thus allowing CFS to gather data as to the provision of other federally-funded services to families. Information about the availability and provision of services will enable increased coordination of services both at the individual level and the larger system level. Any barriers will be identified and plans to address those barriers developed.

## Foster and Adoptive Parent Licensing, Recruitment, and Retention

### Item 33: Standards Applied Equally

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds?

The Child and Family Services (CFS) program's state standards related to all licensed or approved foster family homes and child care institutions receiving Title IV-B or IV-E funds are applied equally. Information in this area is largely based upon self-report but is also consistent with findings from a federal Title IV-E audit and ongoing adoption case reviews. All variances/waivers in licensing practices are within the application of state requirements. Variances/waivers are issued for non-safety related reasons and do not impact a foster or adoptive parent's ability to provide safe and appropriate care for a child placed in their home.

Licensing requirements for individual foster and adoptive families as well as child care institutions are found in state administrative rules and apply to families licensed through the Idaho Department of Health and Welfare (IDHW) as well as child placing agencies. Additional practice expectations specific to the licensing, recruitment, and retention of licensed resource families are contained within CFS practice standards. For the CFSR Round 3, CFS received an overall rating of strength for this item.

The assessment and licensing of foster and adoptive families is organized geographically. The East and West Hubs have individual licensing teams in each of its regions (3, 4, 5, 6, and 7). The North Hub (Regions 1 and 2) enhanced their licensing teams during the last year with social workers and supervisors present in each region. Idaho's licensing process includes family completion of a standardized application, pre-service training including PRIDE and Reasonable and Prudent Parenting, personal references, medical references, criminal history background checks, and a dual licensing assessment. All prospective families are assessed for approval for both foster care and adoption unless the family is clear they would never want to be considered for permanent placement of any child ever placed in their care. Licensing teams are also responsible for the annual renewal of resource family home studies and licenses.

On January 21, 2020, leadership for the Division of Family and Community Services (FACS) approved recommendations made by the foster care re-design workgroup (CFSR PIP 2.1.2). Approved recommendations are designed to improve the foster care workflow and experience of resource parents which includes a clarified process consistently applied statewide. Inquiring potential foster parents will be engaged earlier through the continued use of resource peer mentors (RPMs) who will provide updated information to families. In addition, a self-screening tool will be created to assist families in determining if this is the right time to begin the licensing process. After a family completes an online or a paper application, CFS will screen the application for significant concerns such as Idaho child protection history or criminal history that can be viewed on the Idaho Court Portal. Requests for criminal history clearances, personal references, and medical references will be sent within two business days of receiving the application. Within five business days, a licensing social worker or supervisor will contact the family by phone to review any missing items from the application and answer any questions. An email will be sent to the family with the home environment standards checklist and information about the autobiography after the phone call. A licensing social worker will meet with the family in their home within 15 business days of the application to review the process, conduct an environmental check, and answer any questions. They will also begin the home study by completing the



autobiography with the family. The social worker will assist the family in scheduling pre-service PRIDE training if they have not already done so.

PRIDE training will be available in each region at minimum every 90 days to accommodate the more efficient licensing process. CFS is working with contractor Eastern Washington University (EWU) to implement this schedule of training in July 2020. Hybrid online and in-person PRIDE training is being tried. The use of virtual PRIDE training to accommodate rural regions with fewer participants, meet the needs of families who must travel to attend PRIDE, and to increase attendance, will be explored with consideration also given to maintaining the fidelity of PRIDE training and options for families without internet service. EWU will provide each family's licensing social worker with information about competencies they demonstrated during the training within 14 calendar days of PRIDE completion. The licensing social worker will schedule a home visit with the family to occur within 15 business days of completing training to complete the home study and the Professional Family Development Plan (PFDP) (CFSP 1.2). The licensing worker will complete a written assessment and make a dual recommendation for foster care and/or adoption within 10 days of the home visit. Once the new process is implemented (CFSR PIP 2.1.4), it is believed applicants will complete the licensing process within 90 to 120 days. To further assist in the completion of the assessment, the dual home study has been modified to address all parent competencies within one section eliminating overlap and repetition.

CFS will change its response to licensing complaints. Similar to the process the Centralized Intake Unit uses to determine assignment of maltreatment reports for safety assessments, licensing supervisors will screen licensing complaints to determine assignment for one of three responses: no licensing concerns are present and the report is taken for information only; a licensing concern is present but can be managed with a phone call; a full licensing investigation is needed for the licensing worker to observe, assess, and create a plan of correction when needed. Licensing complaints will continue to be created when a maltreatment report is received on a licensed family, and the licensing social worker will team with the assigned safety assessor. At any time, the licensing worker may determine the licensing report requires a more in-depth response and may choose to complete a home visit. For each licensing complaint a decision will be made regarding the need for an updated PFDP, a plan of correction, or that no further action is necessary.

CFS will continue to use waivers and variances for non-safety related licensing requirements to support the expedited placement of children with their relative and kinship families. The new Comprehensive Child Welfare Information System (CCWIS), Ensuring Safety and Permanency in Idaho (ESPI) will allow for more than one waiver or variance, and the approval and review of variances and waivers. ESPI will also provide for the data needs of the number of variances and waivers in place and alert staff to an expiring variance or waiver which was not a capability of the previous Statewide Automated Child Welfare Information System (SACWIS), iCARE.

The licensing workgroup also considered the annual re-licensing process to provide additional statewide consistency and improved workflow. Effective and expiration dates of a family's foster care license are entered into iCARE and data reflects that updated assessments are being

completed prior to families receiving their annual re-license in most cases. The CFS Practice Standard for the Recruitment and Licensing of Resource Parents was updated in FFY 2018 to require supervisor review and approval of home studies prior to issuing a foster care license. The template and thoroughness of annual assessment updates continues to vary across regions and hubs. While the content of updates varies, all versions meet licensing requirements. The workgroup reviewed existing templates and made recommendations for a statewide document that will address licensing requirements and provide consistency. All resource families will complete a PFDP during their relicensing home visit.

Expectations specific to licensing, recruitment, and retention of licensed resource families are outlined in practice standards that have been in place since 2007, as well as Idaho's statutes and the Administrative Rules Governing Standards for Child Care Licensing (IDAPA 16.06.02). Licensing forms are standardized across the state and comply with these rules. Many of these statewide documents will be reviewed and updated as part of the roll out for foster care redesign. Training will be provided to staff prior to implementation of licensing redesign in the use of the documents, the new licensing process as well as the PFDP (CFSP 1.2; CFSR PIP 2.2).

All initial and updated dual licensing and adoption home studies are reviewed to ensure the study is current and includes required references, background checks, and other required information. This review is conducted by the state permanency program specialist as part of the final quality assurance process prior to adoption finalization. Any errors are required to be corrected before proceeding with the adoption. In FFY 2019, 205 adoption reports of children were reviewed as part of this process. All identified errors were non-safety-related such as failure to obtain medical references for relative resource parents who were initially issued foster care licenses with a variance for medical references. These errors do not have an impact on the family's ability to provide permanency for a child but are required to be corrected prior to adoption finalization.

In July 2018 the state licensing program specialist and regional licensing supervisors developed a continuous quality improvement (CQI) tool for foster care home studies. This tool will be considered by the foster care re-design implementation team in the finalization of CQI tools and processes to be implemented as part of foster care redesign in fall 2020.

In preparation for Idaho's Title IV-E review in January 2018, a brief tool was revised at the end of SFY 2017. This tool was utilized to review all licensed foster homes in state and out of state to ensure compliance with safety related standards prior to issuing a license. Idaho anticipates a Title IV-E review in January 2021 and will review and update this tool to review all families licensed during the period under review to ensure compliance.

### **Child Placing Agencies**

State licensing program specialists with the IDHW's Division of Licensing and Certification ensure Idaho's licensed child placing agencies and childcare facilities comply with all administrative rules. Compliance is reviewed at the time of initial agency or institutional licensing and during each agency or institution's annual re-licensing review.

There is one private child care placing agency working with CFS; Casey Family Programs. This child care placement agency was found to be in substantial compliance and was issued a standard license. No provisional licenses were issued. No licenses were revoked. Casey Family Programs reported that they closed four licenses and licensed four new families.

iCARE issues automatic alerts to the licensing specialists responsible for ensuring compliance by child placing agencies and child care facilities 90 days prior to the expiration of each license. ESPI will follow the same guidelines for alerting staff to a licensed expiring in 90 days. The Division of Licensing and Certification does not use iCARE; however, copies of facility licenses are provided to CFS and entered into iCARE. They will also be entered into ESPI and the contract monitor will be alerted to an expiring license.

### **Licensed Child Care Facilities**

Child care facilities receiving placements of children receiving Title IV-E foster care or adoption assistance are licensed through the IDHW's Division of Licensing and Certification. Agencies and facilities complete re-licensing documentation and licensing specialists conduct onsite visits and file reviews. In FFY 2019, re-licensing reviews were completed prior to license expiration dates for all agencies and facilities. Those found to not be in compliance with any licensing rules were required to correct the identified deficiencies through a plan of correction.

All facilities were found in substantial compliance during FFY 2019 and were issued standard licenses. No licenses were revoked.

### **Data Quality, Scope, Limitations, and Barriers**

The quality of data for standards applied equally is limited to two sources: the adoption quality assurance review; and self-report from licensing supervisors and caseworkers. Most of the available information regarding the consistent statewide implementation of state licensing requirements is based upon self-report of those completing or supervising the completion of the licensing process. While this is not ideal, the information gathered from these reports is consistent with information found during current adoption finalization quality assurance reviews. Methods and processes are being evaluated for the appropriate use of non-safety related variances to improve statewide consistency.

### **Improvement Plan**

A foster care licensing re-design team met in the summer of 2019 to begin the re-engineering CFS's foster care processes (CFSR PIP 2.1; CWT Plan 11 and 19). Re-design will include consideration of each process involved in the recruitment, training, licensing, and retention of resource families. Implementation is expected to occur in FFYs 2020 and 2021.

### **Item 34: Requirements for Criminal Background Checks**

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that the state complies with federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements,

and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children?

The Child and Family Services (CFS) program has an effective system which operates statewide and meets federal requirements for criminal background clearances related to licensing foster care and adoptive families. The case planning process includes provisions for addressing the safety of foster care and adoptive placements for children. For the Child and Family Services Review (CFSR) Round 3, CFS received an overall rating of strength for this item.

Information from multiple sources including the Criminal History Unit, most recent IV-E audit, the Statewide Automated Child Welfare Information System (SACWIS), and licensing social workers and supervisors, indicates the requirements for background checks are being met statewide. All families considered for placement of a child in foster care are required to undergo a criminal history background check, regardless of relative status. Any issues noted in the process are addressed within the licensing assessment. Very few children are placed with families who are unable to pass a criminal history or child abuse background check. When such a home is approved, it is typically one in which a child is placed with relatives or fictive kin whose assessment by a child welfare social worker revealed no safety concerns.

Criminal background checks for individuals in the process of obtaining licensure for foster care or adoption are conducted through the Idaho Criminal History Unit (CHU). All adults residing in the home of prospective foster and adoptive parents must pass a fingerprint-based background check. The check includes a nationwide search of criminal history through the National Criminal History Background Check System, Idaho Bureau of Criminal Identification, Idaho and other states Child Protection Registries, Idaho and other states Adult Protection Registries Idaho Driving Records, Federal and Idaho State Sex Offender Registers, Medicare and Medicaid Exclusion Lists, and the Certified Nurse Aide Registry. Copies of all CHU clearances which include the Adam Walsh checks when applicable are kept in the family's licensing file.

The Code X process to expedite placement of a child in the home of a relative or fictive kin in exigent circumstances includes:

- First emergency placement when a child enters foster care
- No more than 30 days from initial placement when a relative or fictive kin is located
- The child is in danger of losing their current foster care placement

A Code X includes a name-based criminal history check and Idaho Child Abuse Registry check of all adults in the home of the prospective placement. The social worker also completes a home visit to verify a safe home environment. Once placement is made, the adults in the home have five business days to complete the CHU background check process. The relative or fictive kin family is asked to complete the full application for licensure within 30 days, at which time a full licensing assessment is completed. A foster care license or approval for adoption is not issued until all licensing requirements are met or a variance is approved for non-safety licensing requirements.

The number of background checks completed by CHU in all seven regions for foster or adoptive licensing in FFY 2019 was more than double the number of newly licensed foster and adoptive families during the same period. These numbers suggest completion of required background checks of resource parents is occurring consistently. In FFY 2019, 205 dual assessments and adoption home studies for resource families adopting children from all seven regions were reviewed as part of a quality assurance review of adoption finalizations. No cases were found where the adoptive family had not passed the required criminal history background checks.

During FFY 2019, CFS served 3,152 children in foster care. At the closure of FFY 2019, 161 children were placed in an unlicensed home. These placements include Code X families who would become licensed, Code X placements that ended prior to licensure, out of state Interstate Compact for the Placement of Children (ICPC) approved relative placements, and placements whose resource family could not meet all licensing requirements.

Occasionally, children are placed with relatives or fictive kin who are not able to become licensed due to criminal or child abuse history or ICPC relative placements that experience a delay in foster care licensing. In these situations, a social worker has assessed the family and determined circumstances related to the disqualifying history are no longer present and do not pose a threat to the child. All such placements are staffed for approval by the child's social worker, supervisor, chief of social work, and regional program manager before being sent to the Family and Community Services (FACS) division administrator for consideration. The division administrator must give placement approval. While this process allows for children to remain with relatives or kinship families who have been determined to be safe, it also creates delays to permanency as the adults cannot be approved as adoptive parents. During the past year, CFS has revised this process to consider unlicensed placements when the individual cannot pass a criminal history background check in very limited situations. This includes a short-term placement where the child will be moving to another placement, will age out of the system in a few months, or when child is being reunified with biological parents where termination of parental rights (TPR) has occurred. Children placed with relatives through an approved ICPC continue to be placed prior to licensure when the family has met the receiving state's requirements for a relative placement.

The Idaho CFS program completed a Federal Title IV-E audit in FFY 2018 which verified the consistent inclusion of criminal history background checks in the licensing process and files. This audit included a review of 80 cases. No cases were found to have any errors related to criminal background check requirements. The audit findings concluded, "Idaho utilizes a specialized criminal records check unit to ensure completion of all records check requirements, and there is documentation regarding criminal background checks both in iCARE and the licensing files."

There are three types of crimes identified in the background check process: those which do not disqualify a person from becoming a licensed foster or adoptive parent; those which disqualify a person for five years; and those which permanently disqualify a person. Individuals with a five-year disqualifying crime, who are within the five-year timeframe, or with a permanent disqualifying crime on their record, do not qualify to proceed further with the licensing process as they are ineligible to be licensed for foster care or adoption. Any impact non-disqualifying crimes would

have on the ability of the individual to ensure a safe environment for a child is assessed by the social worker assigned to the family. Accurate assessment of these issues is monitored by licensing supervisors statewide (Table 34.1). If a disqualifying crime is identified prior to foster care licensure but following placement of a child in a home through the Code X process, the child is removed from that home with an appropriate transition plan.

Table 34.1 Background Checks

Year	IDHW Background Checks for Licensing	IDHW Background Checks for Code X	Individuals with Permanent Disqualifying Crimes	Individuals with 5-year Disqualifying Crimes
SFY 2017	1433	980	7	1
SFY 2018	1237	862	17	4
*FFY 2018	1275	917	20	4
FFY 2019	1914	812	23	5
*CFS is shifting from the use of SFY to FFY for all CFSP-related reports. Both SFY and FFY numbers are represented in this chart to begin that process while providing data over several years.				

### Data Quality, Scope, Limitations, and Barriers

Reported information and data was gathered from multiple sources including a federal Title IV-E audit, adoption quality assurance reviews, the CHU data reporting system, and licensing social workers and supervisors. Due to the consistency of feedback from the multiple sources, resulting data and information regarding meeting criminal background check requirements appears to be reliable.

Reasons for unlicensed foster care placements due to failure to pass a background check are based on the self-report of those involved in the decision-making process. However, due to the extremely low number of these placements, workers are aware of the circumstances regarding each case and were able to describe how specific concerns in each case were addressed.

No barriers have been identified in Idaho's ability to ensure statewide compliance for criminal history background clearances.

### Improvement Plan

Idaho meets expectations for criminal background check requirements. No changes negatively impacting this rating are anticipated. There is no plan for further enhancements or improvements at this time.

## Item 35: Diligent Recruitment of Foster and Adoptive Homes

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the diligent recruitment of potential foster and



adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide

For the Child and Family Services Review (CFSR) Round 3, the Child and Family Services (CFS) program received an overall rating of area needing improvement for this item. Current diligent recruitment efforts do not sufficiently ensure potential foster and adoptive families reflect the ethnic and racial diversity of children in the state. CFS does not have a sufficient number of licensed resource families proportional to the African-American, American Indian, and Hispanic children in Idaho's foster care system.

Idaho's statewide resource family recruitment and retention activities are contracted through Eastern Washington University (EWU). Contracted services include resource family recruitment, retention, Parent Resources for Information, Development, and Education (PRIDE) pre-service training, core training, resource parent training and support groups, and three annual Resource Family and Social Worker Conferences. EWU is responsible for the collection, compilation and analysis of data, and the development of reports for management specific to the Resource Parent Mentor (RPM) program.

During FFY 2019, there was an increase in the number of licensed non-relative and relative/fictive-kin resource family homes. The need to find and prepare families to foster and adopt children is ongoing. In FFY 2019, there were 3,152 children served in Idaho's foster care system, and 1,545 licensed resource families. Of those, 714 or 46% were non-relative (general) families, while approximately 805 or 52% were relative/fictive kin caregivers. Table 35.1 highlights the increase in the number of children served in foster care, compared to licensed foster homes categorized by type.

Table 35.1 Children vs. Foster Homes

	FFY 2016	FFY 2017	FFY 2018	FFY 2019
# of Children in Foster Care	2,688	2,781	3,012	3,152
Total Licensed Foster Homes	1,338	1,383	1,476	1,545
Non-relative Family Home	594	595	656	714
Relative/Fictive-Kin	686	741	783	805

During FFY 2019, Idaho licensed 555 new resource families (Table 35.2); 34.4% of these families are non-relative foster/adopt families, and 65.23% were relative/fictive kin families. Relatives and fictive kin are recruited on a child-specific basis. Placement with relatives or fictive kin reduces the trauma experienced by a child entering foster care and enables children to maintain their connections and be placed with families able to meet the child's cultural needs. Idaho's rate of placement with relatives and fictive kin licensed resource families has increased over the past year.

Table 35.2 New Resource Family Licenses

Resource Type	FFY 2018	FFY 2019
Non-Relative	180	191
Relative	290	260
Fictive Kin	93	102
Treatment Home	7	2
Grand Total	570	555

The number of children placed in foster care has gradually increased over the past few years. At any given time, there are approximately 1,700 children in foster care. Despite the increased use of relative/fictive kin placements, CFS is in continual need of more non-relative licensed resource families (Table 35.3).

Table 35.3 Regional Distribution of Licensed Families

Licensed Resource Families by Region				
Location	FFY 2016	FFY 2017	FFY 2018	FFY 2019
Region 1	175	176	186	190
Region 2	70	71	60	78
Region 3	213	225	243	302
Region 4	276	256	259	265
Region 5	97	109	133	147
Region 6	130	120	113	136
Region 7	108	121	135	157
State	1,068	1,078	1,128	1,274

The distribution of placements of children in foster care has remained fairly consistent over the past four years with a slight increase in relative placements and an increase in higher level of care with 43.8% of children placed in non-relative licensed resource homes; 30.5% in relative placements; 8.7% placed with fictive kin; and 10.6% in higher levels of care such as treatment foster care, group homes, residential facilities (Table 35.4). Anecdotal data indicates this increase in higher level of care is likely related to the loss of a treatment foster care program in last year. CFS is working with partner is the Behavioral Health and Medicaid programs to renew and improve treatment foster care availability. Implementation is expected in December 2020.

Table 35.4 Placement Distribution

Distribution of Placements for Children in Foster Care				
Placement Type	FFY 2016	FFY 2017	FFY 2018	FFY 2019
All Children	1,428	1,598	1,721	2,110
Non-Relative	571 40%	657 41.1%	678 39.4%	924 43.8%
Relative	449 31.5%	531 33.2%	573 33.4%	644 30.5%
Fictive Kin	104 7.3%	127 8.0%	140 8.1%	183 8.7%
High Level	121 8.5%	124 7.8%	130 7.6%	224 10.6%
Home Visit	173 12.1%	149 9.3%	191 11.1%	224 10.6%
DJC/Detention	10 .07%	10 0.6%	9 0.5%	10 0.5%
Note: Each Year is the average of 4 point-in-time Resource counts at the beginning of each quarter.				

During FFY 2019, CFS saw a slight decrease in the number of American Indian children placed in foster care with no change in the number of American Indian homes. There was a decrease in the number of Hispanic children placed in foster care with a corresponding decrease in the number of Hispanic foster homes. The number of Black or African-American children placed in foster care decreased with a corresponding decrease in the number of Black or African American foster parents. This data may indicate success in locating relative and fictive kinship placements specific to the American Indian, Hispanic, and Black population (Table 35.5). However, the data also reflects the ongoing need to recruit non-relative families specific to these populations. CFS needs to highlight these strategies and continue efforts to recruit families of similar race and ethnicity to the children placed in foster care.

Table 35.5 Race and Ethnicity FFY 2019

Race	# Children in Foster Care				# Licensed Foster Parents			
	FFY 2019				FFY 2019			
	Total	Ethnicity			Total	Ethnicity		
		Hispanic	Non-Hispanic	Unknown		Hispanic	Non-Hispanic	Unknown
Alaskan Native	3	0	3	0	0	0	0	0
American Indian	103	26	75	2	41	1	37	3
Black/African-American	85	9	72	4	23	1	18	4

Filipino	3	1	2	0	2	0	2	0
Hawaiian	10	4	6	0	2	0	2	0
Japanese	2	0	2	0	1	0	1	0
Multiple	0	0	0	0	22	3	13	6
Other Asian	11	0	11	0	13	0	9	4
Other Pacific Islander	21	5	15	1	3	1	1	1
Other	0	0	0	0	0	0	0	0
Unable to Determine	154	13	21	120	115	15	16	84
White	2,833	399	2,385	49	2,927	252	2,110	565
<b>TOTAL</b>	<b>3,225</b>	<b>457</b>	<b>2,592</b>	<b>176</b>	<b>3,149</b>	<b>273</b>	<b>2,209</b>	<b>667</b>

### Retention

The factors that contribute to the retention of currently licensed resource parents are continuously under analysis; however, the root causes for the program's performance in this area have not been fully identified. At any given time, there are approximately 1,000 licensed resource families in the state. During FFY 2019, 554 licenses were closed or expired (Table 35.6), and 542 new licenses were issued, for a net gain of 75 new resource families. This continues a two year trend of increasing the number of resource families statewide. Analysis indicates at least half of closures are relative and fictive kin resource families who chose not to continue after their relative/kinsip child reunifies or is adopted. Exit interviews with non-relative resource families who choose to close their license must be implemented to further inform Idaho's recruitment and retention system.

Table 35.6 Closed/Expired Licenses

Closed or Expired Licenses		
Resource Type	FFY 2018	FFY 2019
Non-Relative	190	207
Relative	244	267
Fictive Kin	63	72
Treatment Home	13	8
<b>Total</b>	<b>510</b>	<b>554</b>

Data for FFY 2019, indicates there were 96 licenses revoked (Table 35.7). Seventeen of those were revoked for standards of care. Seventy-nine licenses were revoked for voluntary reasons. In reviewing these closures it appears that there is statewide inconsistency in entering the closure reason. Some regions use the closure reason "revoked – voluntary" when a resource family requests to close their license or decides not to renew their licesene. Other regions utilize the closure reason "application withdrawn" for the same situation. The new information system, ESPI has been built to provide clarification to the reasons for license closure. Additional training will be provided to licensing staff regarding the closure reasons during the implementation of the licensing phase of ESPI.

Table 35.7 Revoked Licenses

# Resources with Licenses Revoked		
License End Reason	FFY 2018	FFY 2019
Revoked - Standard of Care	13	17
Revoked - Voluntary	95	79
Total	108	96

### Data Quality, Scope, Limitations, and Barriers

Limited resources create many barriers to the recruitment and retention system; impacting timely licensure of prospective families and the support foster families receive. Over the past several years, CFS has made improvements to recruitment and retention metrics. These metrics include measurements of Idaho's licensing steps from inquiry through the licensure process and the average length of time for resource parents to achieve each step. Additionally, data needs to include effectiveness of recruitment efforts and retention data that speaks to resource family closures.

Although Idaho has made improvement to our data metrics, data specific to recruitment and licensing inquiries is limited and not readily available. CFS relies on several data systems from multiple sources that do not interface, to generate data and reports. Idaho has addressed this need in the development of the CCWIS, ESPI. Throughout the licensing re-design workgroup, information was provided to the ESPI development team to ensure necessary automation supports and data collections were defined, documented and scheduled for implementation (CFSR PIP 2.1.3). ESPI is designed to provide a significant amount of data not currently available through the current system. This includes information regarding the number of foster parent inquiries; prospective resource family information meetings held with number of participants; PRIDE rounds held with number of participants who completed each round; the number of resource parent applications received and approved, denied or opted out; and the length of time to licensure. ESPI will further break down data regarding applications into the various types of Expedited Placements, General, Relative, Kinship, ICPC, and Treatment Home. At the request of leadership, licensing teams, external partners and stakeholders, and the re-design workgroup, ESPI is designed to assist in matching the needs of children to the skills of foster parents.

Rural recruitment and retention of African-American, American Indian, and Hispanic families is very challenging. Relationships are key to these targeted recruitment efforts and relationship building takes time and requires CFS staff and leadership to be present consistently rather than relying completely on contractors.

### Improvement Plan

Improved access to data specific to recruitment efforts is necessary for CFS to develop a more effective resource parent recruitment and retention plan. A reengineered foster care recruitment and licensing process will be implemented statewide in FFY 2021 (CFSR PIP 2.1; CWT Plan 11)

and includes the monitoring and tracking of related data. The data will be analyzed to determine the types of resource parents most needed by geographic location, race/ethnicity, ability to take sibling groups, and characteristics of children needing placement. The resulting information will be considered in a re-evaluation of Idaho's resource parent recruitment and retention effort (CWT Plan 19) to determine additional improvements. Idaho's 2020-2024 Foster and Adoptive Parent Diligent Recruitment Plan is included as Appendix A.

### **Item 36: State use of Cross-Jurisdictional Resources for Permanent Placements**

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide?

For the Child and Family Services Review (CFSR) Round 3, Child and Family Services (CFS) received an overall rating of area needing improvement for this item. Although the agency has processes in place to ensure the effective use of cross-jurisdictional resources, CFS does not meet the requirement for conducting home studies received from other states within the 60-day requirement. Relative searches and child-specific recruitment methods also include outreach to prospective families in geographical locations outside the child's local community. These recruitment efforts are followed by the appropriate use of the Interstate Compact for the Placement of Children (ICPC) or in-state cross jurisdictional processes.

Although sufficient quantitative data regarding the timeliness of requests for outgoing ICPC permanent placements is not available, qualitative data suggests children achieving permanency out of state are consistently placed within the same period of time as termination of parental rights occurs. This placement timing is necessary to support continued reunification efforts with birth parents who remain in Idaho.

In-state placements are considered cross-jurisdictional when a child is placed in a region or hub other than the one in which they resided at the time they entered foster care. When an in-state cross-jurisdictional placement is being considered, the child's social worker makes an informal request to the licensing team assigned to the geographical location where the prospective family resides. That licensing team then completes the evaluation of the family which is provided to the placing region who makes the placement determination. All out of state placements are requested and made through the ICPC.

Cross-jurisdictional placements occur for parent placement, temporary relative placement, temporary foster placement, or permanent placement through guardianship or adoption with a family who resides outside the child's community. A child's needs may also require placement in a family with a specific set of skills who is located in another jurisdiction.

To promote the selection of the permanent family best able to meet a child's needs, regardless of geographical location, CFS uses recruitment methods designed to reach families throughout the



state, regionally, and nationally. CFS contracts with Eastern Washington University (EWU) to engage with prospective adoptive families interested in adopting a child from Idaho's foster care program. Families may be from Idaho or any other state and may have received their home study through a state agency or licensed adoption agency or home study provider. Current adoptive family home studies are included on the internal Wednesday's Child Waiting Families SharePoint page. The page includes demographic information about prospective adoptive families as well as information about the gender, age, sibling group size, and special needs they will consider. A copy of each family's home study is also attached. Adoptive parents are also identified through child-specific recruitment. A statewide contract for child-specific recruitment includes photo listings on websites with local, regional, and national audiences (Foster and Adoptive Parent Recruitment Plan).

All incoming and outgoing ICPC placement requests are reviewed by the ICPC program specialist or state ICPC administrator for quality and accuracy. Incoming requests from other state foster care systems are forwarded to local ICPC liaisons who assign the request for assessment. ICPC liaisons are located in Region 1 (North Hub coverage), Region 3 (regional coverage), Region 4 (regional coverage), Region 5 (regional coverage), Region 6 (regional coverage), and Region 7 (regional coverage). State case management teams conduct all incoming parent and unlicensed relative home study requests. State foster care licensing teams conduct all incoming ICPC assessments including those for relative and non-relative foster care placement, and permanent placement through adoption or guardianship. When a child is placed from another state's foster care system in Idaho through the ICPC, a child welfare case management or adoption social worker from the region where the child is placed is assigned to supervise that placement. In FFY 2019, Idaho ICPC processed 415 incoming requests for children in foster care to be placed in an adoptive, parental, relative, residential treatment, or private adoptive placement.

Concurrence recommendations for permanency finalizations are made by the supervising social worker or supervisor and approved by the ICPC program specialist or administrator before being sent to the placing state or, for outgoing ICPC placements, requested by the Idaho social worker through the ICPC program specialist.

With the passage of the Safe and Timely Interstate Placement of Foster Children Act of 2006, CFS developed a practice standard to guide social workers in completing and reporting the results of final home study reports. These home study reports are due within 60-calendar days from the date Idaho's ICPC Administrator receives and processes the request.

**Table 36.1 ICPC Permanency Home Studies Completed within 60 Days**

% of Incoming Permanency Home Studies Completed within 60 Days			
Region	FFY 2017	FFY 2018	FFY 2019
1	19.8%	20.0%	11.1%
2	22.7%	23.5%	20.0%
3	48.2%	20.9%	34.7%

4	51.4%	43.9%	14.8%
5	44.4%	25.8%	29.4%
6	55.1%	38.2%	30.6%
7	70.4%	23.6%	23.5%
State	44.8%	27.0%	23.4%

During FFY 2019, 23.4% of incoming adoption home study requests and final placement decisions were completed within the 60-day timeframe (Table 36.1); however, the average time to completion of preliminary home study reports was 55 days. Preliminary home studies are used when licensure requirements such as criminal background checks, Adam Walsh checks, or medical references remain pending and completion of a final home study and placement decision are therefore delayed. Many families participating in ICPC home studies require Adam Walsh clearances, thereby extending the amount of time it takes for a background check clearance to be received.

Idaho's use of cross-jurisdictional placements is positively impacted by in-state and out of state recruitment methods. All of Idaho's outgoing ICPC adoptive placements with families other than relative/fictive kin or current resource parents have been identified through child-specific recruitment. The implementation of the new Wednesday's Child Waiting Families program builds on the previous "Home Study" SharePoint page increasing awareness of the possibility of cross-jurisdictional placements within Idaho; not only within child welfare social workers but in the larger adoption community as well. The contractor is reaching out to private adoption agencies and home study providers from all regions to encourage them to register their families with the site. Out of state families who inquire about a specific Idaho child, but are not selected for placement of that child, are also informed and encouraged to register for the site so they may continue to be considered for placement of other Idaho children.

#### **Data Quality, Scope, Limitations, and Barriers**

In April 2020, Idaho implemented the National Electronic Interstate Compact Enterprise (NEICE) system to assist Idaho ICPC business needs and data reporting requirements. Data is not yet available from NEICE due to its recent implementation.

Until April 2020, CFS completed data entry in three separate data systems including a SharePoint tracker, the Statewide Automated Child Welfare System (SACWIS), and the ICPC Database. The SharePoint tracker was the only method of tracking timely completion of home studies. CFS was unable to pull reliable data from the ICPC Access Database regarding home study completion due to system limitation with the software.

The agency used a 1998 version of Microsoft Access for the ICPC Database system. It had limitations in the available data including total numbers of the various types of placement requests and home studies. SharePoint and spreadsheet tracking systems measured the

timeframe for completion of final home studies, preliminary home study approvals, and final placement decisions within 60 days.

### **Improvement Plan**

Idaho entered into a Border Agreement with Oregon to facilitate the timely placement of children with their out-of-state relatives in neighboring counties in FFY 2019. As a result of this agreement, CFS received nine incoming requests from Oregon resulting the approval of four placements, four denials, and one pending request. CFS has made one placement request to Oregon which was denied. Discussions with Oregon regarding the potential expansion of the boarder agreement to additional counties is expected to occur in the next year.

Processes related to timely outgoing ICPC requests as well as those related to timely completion of incoming ICPC requests are being re-designed as part of case management (CWT Plan 9), concurrent planning (CFSR PIP 1.1.3), and foster care workflow (CFSR PIP 2.1.1; CWT Plan 11). Approved recommendations of the ICPC process improvement team included a revision of the new applicant set-up process featuring earlier contact with the prospective placement family to occur through the office of the ICPC Administrator and the requirement for families to complete their criminal history background checks soon after receipt of the request. As the result of this recommendation, a standardized introduction letter for prospective incoming ICPC placements was developed and is used to inform them of the process, outline the actionable steps needing taken, and ensure one consistent message is being used statewide. Families are informed of the requirement to schedule their criminal history background check within 14 days of the date of the letter. CFS use of the letter template was shared with the ICPC Administrators of all other states. Further enhancements to the incoming ICPC process will be addressed during implementation planning for foster care re-design in the summer and fall of 2020.

In October 2019, implementation of ongoing Case Consultation (CFSR PIP 1.2.1; CFSP 1.1) began statewide. Case Consultation occurs a minimum of every 90 days through the life of a case and includes discussion of progress related to parent, relative, and/or permanency placement. Related tasks are identified and a plan to achieve them made. Through Case Consultation, the need for ICPC requests is identified earlier resulting in more timely requests being made. Psycho-social rehabilitation (PSR) workers were hired statewide to assist child welfare social workers with several functions, including completing outgoing ICPC home study requests. Also implemented, was the requirement for regions to prioritize completion of home study requests from other Idaho regions to prevent the need for child welfare social workers from one region to travel to another region to assess and license a family.

### (3) PLAN FOR ENACTING IDAHO'S VISION

The plan for improvement is based on the analysis of child welfare outcomes measured through Federal and State conducted Child and Family Services Reviews (CFSR), program performance on other federal requirements for the Child and Family Services Plan (CFSP), and findings in the Annual Progress and Services Report (APSR).

#### Root Causes

Between 2016 and 2019, Idaho's Child and Family Services (CFS) program underwent multiple reviews, assessments, and evaluations including the Child and Family Services Review (CFSR) Round 3 in 2016, ongoing state-conducted Case Record Reviews (CRRs), two evaluations by the Idaho Legislature's Office of Performance Evaluation (OPE), an assessment of Continuous Quality Improvement (CQI) practices with the Capacity Building Center for States (CBC), and a Comprehensive Organizational Health Assessment (COHA) with the Butler Institute for Families. Internal and external partner and stakeholder feedback was consistent with that received during the development of the CFSR Program Improvement Plan (PIP) (Appendix F) and outcomes of the OPE evaluations, CBC assessment, and COHA evaluation. In preparation for the development of the 2020-2024 CFSP, an exploration of the challenges experienced implementing ongoing safety assessment and community engagement strategies of the 2015-2019 CFSP further illustrated the same concerns.

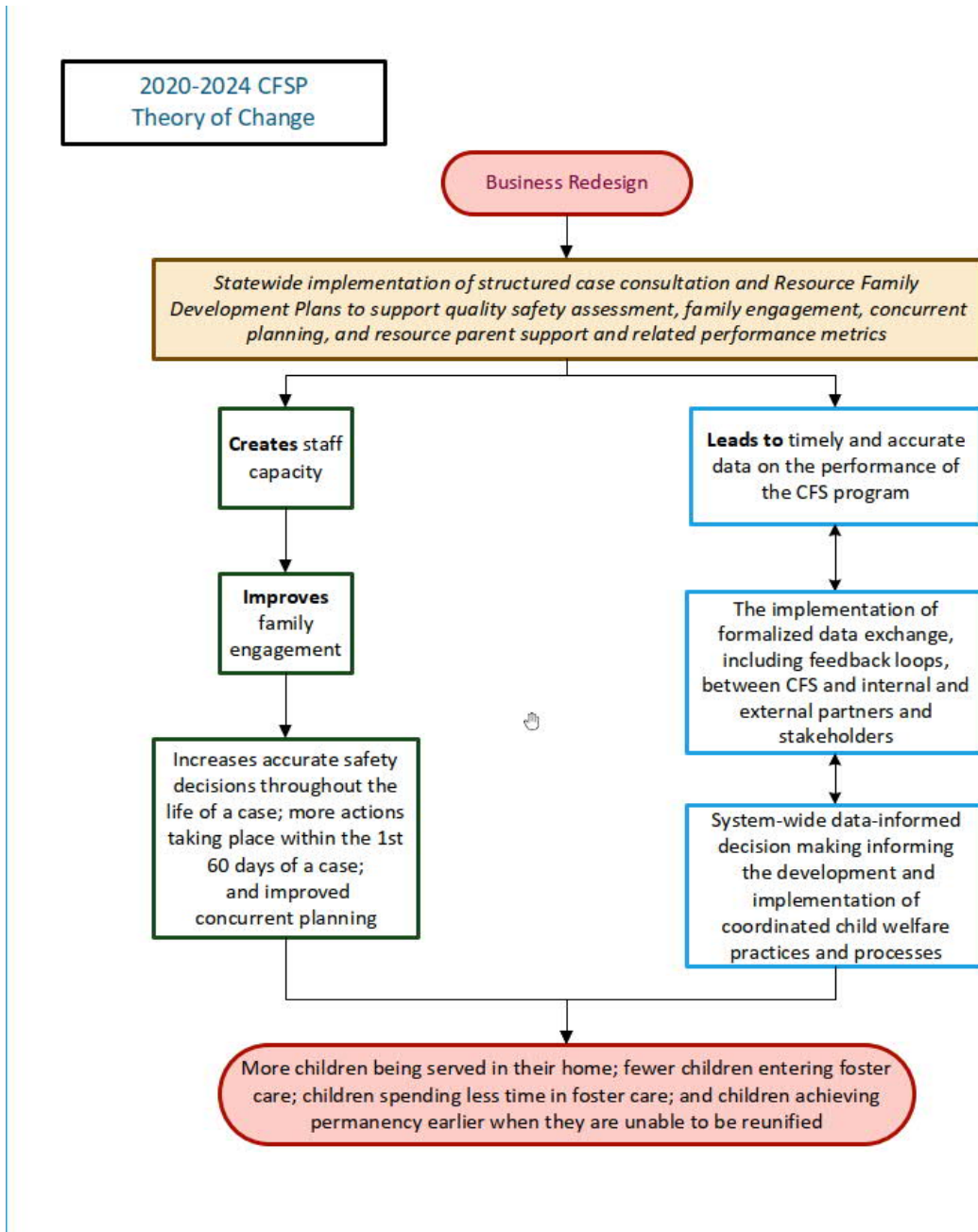
The CFS program was determined to utilize effective child welfare practices, such as an enhanced safety model and concurrent planning; however, the efficacy of the practices was limited due to issues of workload capacity, process-related delays, inadequate family and community engagement, and limitations in the availability and use of data. Specific barriers included:

- Inconsistent on-going assessment of safety and concurrent planning
- Insufficient data and information to fully assess any potential court-related concerns
- Ineffective resource parent training and limited support
- Inadequate CFS social worker supervision and lack of accountability

#### Theory of Change

The 2020-2024 Child and Family Services Plan (CFSP) is focused on ensuring the safety, permanency, and well-being of Idaho children using business re-design methods, engagement of community partners and stakeholders, and use of CQI to address areas needing improvement. This is a focus shared by the CFSR PIP and Child Welfare Transformation (CWT) Initiative (Appendix G). By focusing on the re-design of business processes, CFS can continue to utilize effective practices already in place while enhancing their efficacy through improved workflows, increased social worker capacity, and resource parent support. The embedding of CQI methods within these processes will enhance community engagement through increased ability to share

accurate outcome data with internal and external partners and stakeholders with whom we will collaborate in the ongoing development and implementation of CFS plans, goals, and strategies.



The CWT Initiative is a larger plan designed to support the successful meeting of goals and objectives found in the 2020-2024 CFSP and the CFSR PIP. Due to the large scale of the project, significant shifts in organizational culture, processes, and practices it entails, and the retrospective nature of CRRs, CFS anticipates a period where performance outcomes may decrease before long-term improvements are made.

In addition to the 2020-2024 CFSP, the CFS program is involved in a variety of plans including the CFSR Program Improvement Plan (PIP), CWT Plan, Idaho Court Improvement Plan (CIP),

Comprehensive Addition and Recovery Act (CARA) PIP, and the IDHW Strategic Plan. In consideration of the negative impact workload capacity issues have had on practice performance, the CFS program has prioritized the need for each plan to support and complement the work being implemented through the other plans. 2020-2024 CFSP goals, objectives, and strategies were designed to work in conjunction with those found on other plans.

**Goal 1: Implementation of effective case consultation and resource family licensing processes that align with best practice standards, ensures safety assessment, informs permanency decisions, and supports resource parents.**

Addresses Safety Outcomes 1 and 2; Permanency Outcomes 1 and 2; Well-Being Outcomes 1, 2, and 3; and Systemic Factors 23, 28, 29, 30, and 36

Quality casework practice at every stage of working with a family is essential for positive safety, permanency, and well-being outcomes for Idaho children and families. The following key practices have been identified as critical in supporting positive outcomes in Idaho:

- Safety assessment must be comprehensive, meaning it goes beyond the reported incident of maltreatment to understand how the family operates every day. Child and Family Services (CFS) social workers must actively engage all family members, gather sufficient information, reconcile discrepancies, and critically analyze the information not just at the point of initial assessment, but throughout the life of a case.
- Concurrent planning must begin early and active efforts to achieve both primary and secondary permanency goals must be made. Concurrent planning practices include: early and ongoing engagement of parents, full disclosure of case progress and permanency planning, early identification of relatives, and early and intensive reunification efforts.

As described in "Root Causes," Idaho conducted extensive analysis to determine why these practices are not occurring with consistency incorporating data from the Child and Family Services Review (CFSR) Round 3, ongoing Case Record Review (CRR)s, program evaluations, and internal and external stakeholders including field staff, community partners, birth and resource parents, youth, the tribes and the court. Data analysis revealed the following key concerns:

- There are unclear policies and practice standards regarding expectations for assessing all members of a family/household.
- Supervision has focused primarily on initial safety assessments rather than ongoing assessments of risk and safety.
- Social workers either do not consistently use the case consultation element of the safety model to define safety threats or conditions for "return home"; or when they do, the safety threats and conditions for "return home" are not clearly articulated within court reports, court testimony, or case plans. This leaves court partners without a clear understanding of the underlying safety issues and the linkage of how case plan goals support mitigation of these issues.
- Parents (both mothers and fathers) who were not immediately engaged at the onset of a case due to issues like incarcerations, active mental health or substance abuse issues, or an inability to locate them, were less likely to be engaged throughout the life of the case.



Lack of engagement was not due to adaptive challenges, but rather was influenced by workload demands and social workers not appropriately prioritizing engagement in these cases.

- Concurrent planning occurs effectively in parts of the state where staffing processes are utilized properly.
- Resource parents, legislators, court partners, youth, and field staff have raised concerns regarding the adequacy of ongoing supports for resource parents.
- During SFY 2018, 41% of the 1,481 placement changes that occurred for children in care were the result of a resource parent's request. Of those, 35% were due to challenges experienced by the resource parent in managing the child's behaviors. For cases rated as an area needing improvement (ANI) in identifying and meeting foster parent needs, it was found resource families were not prepared to care for the children placed in their homes, needing training in caring for children with special needs which was consistent with feedback received through post-permanency and annual resource parent surveys.
- Resource parent focus groups conducted statewide indicated a need for additional structure for ongoing training requirements as well as additional training.
- Studies revealed Idaho's workforce is licensed, knowledgeable, and skilled, yet social workers' performance is challenged by significant competing demands on their time. CFS social workers overwhelmingly expressed a desire to complete high quality casework; however, due to unmanageable workloads, they are unable to consistently meet practice requirements and engage families which negatively impacts safety and permanency outcomes.

The CFS program believes making changes to how child welfare staff are trained and supported, how workflows are designed, how work is completed and measured, and how staff and supervisors are held accountable to process-level tasks is key for staff to be successful with case consultations and will assist social workers and supervisors in maintaining a focus on these key practice areas. Recognizing our workforce concerns, we want to strengthen and use a team approach with access to workflow and performance data when supporting field staff in their casework.

A structured case consultation process which specifically addresses safety, permanency, and well-being throughout the life of a case, including specific attention to the engagement of parents, stability of placements, and timing of home study requests is part of the re-design of safety assessment (CFSR PIP 1.1 and 1.2; CWT Plan 2) and concurrent planning (CWT Plan 3) processes. Professional Family Development Plans (PFDPs) are being used as part of re-designed foster care processes (CFSR PIP 2 and CWT Plan 11). PFDPs have been in place per Idaho standards; however, are not implemented consistently and were being utilized incorrectly as a corrective action plan. The PFDP is intended to be a supportive tool in developing plans that identify ongoing training and support needs, continuing to build on the family's skills and knowledge to support placement stability.

The courts are also critical and essential partners in improving the consistent application of safety assessment and concurrent planning practices leading to improved outcomes for Idaho children

and families. It is imperative we work together to ensure common understanding of CFS program practice and related court requirements. For this reason, a strategy targeted at increasing CFS communication with the courts and ensuring critical understanding of key aspects of safety and concurrent planning practices has been included in the CFSR PIP (1.1 and 1.3).

Implementation of the re-designed processes in the lowest-performing regions as to safety assessment, permanency, and meeting the needs of foster parents is included in the CFSR PIP; however, to promote statewide consistency and success, it is essential the CFS program implement them in the rest of the state as well. Therefore, implementation of these processes and practices in the areas of the state not captured in the CFSR program improvement plan (PIP) are included in the 2020-2024 CFSP.

### Goal 1 (1): Measure of Progress

1. Increase performance for Risk Assessment and Safety Management (Item 3)  
**Goal: 80%** **Target Date: FFY 2022**  
  
**Idaho Baseline Performance: 73.4% FFY 2018 (CRR)**  
**Idaho Progress Performance: 41.77% FFY 2019 (CRR)**
2. Increase performance for Stability in Foster Care Placement (Item 4)  
**Goal: 85%** **Target Date: FFY 2022**  
  
**Idaho Baseline Performance: 75.0% FFY 2018 (CRR)**
3. Idaho Progress Performance: 65.91% FFY 2019 (CRR) Increase performance for Permanency Goal for Child (Item 5)  
**Goal: 81%** **Target Date: FFY 2022**  
  
**Idaho Baseline Performance: 80.9% FFY 2018 (CRR)**  
**Idaho Progress Performance: 67.44% FFY 2019 (CRR)**
4. Increase performance for Needs and Services of Child, Parents, and Foster Parents (Item 12)  
**Goal: 74%** **Target Date: FFY 2022**  
  
**Idaho Baseline Performance: 68.8% FFY 2018 (CRR)**  
**Idaho Progress Performance: 31.58% FFY 2019 (CRR)**
5. Increased performance on Educational Needs of the Child (Item 16)  
**Goal: 95%** **Target Date: FFY 2022**  
  
**Idaho Baseline Performance: 88.2% FFY 2018 (CRR)**

Idaho Progress Performance: 72.22% FFY 2019 (CRR)

6. Increased performance on Physical Health of the Child (Item 17)

**Goal: 90%**

**Target Date: FFY 2022**

**Idaho Baseline Performance: 86.7% FFY 2018 (CRR)**

Idaho Progress Performance: 65.63% FFY 2019 (CRR)

7. Increased performance on Mental/Behavioral Health of the Child (Item 18)

**Goal: 90%**

**Target Date: FFY 2022**

**Idaho Baseline Performance: 78.9% FFY 2018 (CRR)**

Idaho Progress Performance: 42.37% FFY 2019 (CRR)

**Goal 1(1): Target Completion Date: FFY 2022**

**Goal 1, Strategy 1 (1.1):**

Implement a structured case consultation process that supports quality safety assessment, family engagement, and concurrent planning in Regions 1, 4, 6, and 7.

The implementation of a structured case consultation processes is expected to create CFS social worker and supervisory capacity through the use of a consistent team approach to informed decision-making. Case Consultations will occur at intervals of no more than every 90 days throughout the life of a case and include re-assessment of safety and concurrent planning activities including the identification and engagement of parents and relatives, stability of placements, identification and meeting of child, parent, and resource parent needs and services, and parent and child relationships and visits. Consultation documentation will provide CFS with the ability to develop data related to the array of services and accessibility of the services to children and families. Implementation of the structured case consultation process will occur within the implementation of re-designed safety assessment and concurrent planning processes. Improvements are expected to be seen in Safety Outcome 2, Permanency Outcomes 1 and 2, Well-Being Outcomes 1, 2, and 3, and Systemic Factors 23, 29, and 30.

**Goal 1, Strategy 1 (1.1): Benchmarks for Measurement**

**Safety Assessment-Case Consultation Measurement 1:**

Reports of maltreatment will receive a structured consultation within five business days from seeing the first child of concern.

Baseline: 0

Benchmark: 60%

(Actual): 47%

Date: December 2019

Date: December 2019

Goal: 80%  
 (Actual): 50%

Date: May 2020  
 Date: May 2020

#### Safety Assessment-Case Consultation Measurement 2:

Cases where the child(ren) are determined to be safe will have a Comprehensive Safety Assessment (CSA) completed and closed at the first consultation.

Baseline: 0  
 Benchmark: 55%  
 (Actual): 41%

Date: December 2019  
 Date: December 2019

Goal: 75%  
 (Actual): 0

Date: May 2020  
 Date: May 2020

#### Concurrent Planning-Case Consultation Measurement:

Ongoing Case Consultation is required to be completed every 90 days with the exception of cases where a child is placed in congregate or residential care. In those situations, a case consultation must occur a minimum of every 30 days. Other case-specific situations may also result in the need to complete a consultation earlier than the required 90 or 30-day period. Concurrent Planning-Case Consultation Measurement will be related to the percentage of open cases overdue for case consultation. The new Comprehensive Child Welfare Information System (CCWIS) has been designed to record the completion of case consultation and resulting data will be used to identify cases overdue for consultation. CCWIS implementation for concurrent planning occurred in late April 2020. Adjustments and clean-up of information transferred from the previous information system continue to be made. Once this process has been completed, specific case consultation goals, benchmarks, and related dates will be set. This is expected to occur in August 2020.

Goal 1, Strategy 1 (1.1): Target Completion Date: FFY 2020

#### 2021 Update and Progress for Goal 1, Strategy 1 (1.1):

Local and Centralized Safety Consultations were implemented in Regions 1, 4, 6, and 7 as part of the comprehensive safety assessment (CSA) process re-design between April and June 2019. Implementation occurred in remaining Regions 2, 3, and 5 at the same time (CFSR PIP 1.1.5). A Central Consult team was developed including experienced child welfare social workers who assist regional social workers in the completion of CSAs when the regional social worker has assessed the child to be safe. If the Centralized Safety Consultation results in a determination the child is safe, the case is closed at that time. A local Safety Case Consultation is completed with a regional social worker's supervisor and used when a child has been determined to be unsafe through a CSA. Use of the two types of safety consults allows for regional social workers and their supervisors to focus more time on unsafe cases.

Implementation of ongoing Case Consultation was completed statewide in October 2019. The Child and Family Services (CFS) program's case consultation process requires all cases to receive Case Consultation a minimum of every 90 days through the life of the case. The process begins following a determination a child is unsafe through the use of a Local Safety Consult during a comprehensive safety assessment. Ongoing Case Consultations are attended by the assigned social worker, permanency worker (when assigned), and supervisor. The child welfare chief of social work, an additional supervisor, or an experienced social worker not involved in the case also attend to provide an "outside" perspective. CASA must be invited for consults expected to include recommendations for an extended home visit, a decision to separate siblings in foster care, a change in permanency goal, or a placement change. The Case Consultation structure includes: (1) an informal re-assessment of safety; (2) permanency incorporating appropriateness of permanency goals, placement stability, paternity, and relative search and engagement; (3) well-being related to the needs and services for each child, parent, and resource parent; (4) case plan progress; and (5) identification of next steps including assigned tasks and due dates. Supervisor Staffings occur in months a Case Consultation is not held and use the same structure which is further found in the monthly narrative documentation template.

At the time of implementation of local and centralized Safety Case Consultations and ongoing Case Consultations, performance measures were identified and made available on-demand on IDHW's Tableau to child welfare social workers, supervisors, regional, leadership, program and policy specialists, the Bureau of Operational Design, and executive leadership. Quality assurance tools were developed and implemented (CFSR PIP 1.2.3). Reports for each of the CSA and concurrent planning performance measurements (CFSR PIP 1.1.7) are updated daily. Also located on Tableau, are slice reports of case activities included in the re-designed CSA (CFSR PIP 1.1.5) and concurrent planning processes (CFSR PIP 1.1.6) which impact established performance expectations. Daily updates to these reports allow supervisors, chiefs of social work, and leadership to quickly identify cases in need of a completed safety assessment or case consultation to continue to move forward. Reports can be viewed from individual case or social worker level, supervisor level, regional level, or state level. Executive leadership began monitoring performance metrics to evaluate implementation progress and early performance and ensure process improvement and operational support with the re-implementation of the CSA process in June 2019. Concurrent planning measurements were added in October 2019 upon implementation of case consultation and concurrent planning processes (CFSR PIP 1.2.1). Monthly Outcome Meetings are held where statewide leadership meets with regional program managers to discuss specific data reports, perform root-cause analysis, brainstorm solutions to any identified challenges, and develop solutions (CFSR PIP 3.1.2).

CFS remains in the first year of implementation for case consultation related to both safety assessment and concurrent planning. As with the implementation of any significant change, unexpected challenges occurred (see Implementation Support Update) which have impacted the ability to meet benchmarks and goals outlines for this strategy. The identified

goals for safety assessment case consultation continue to be appropriate; however, benchmarks and completion dates are being re-considered. Based on lessons learned in the setting of the original goals and timeframes, data is being collected to determine the needed change.

### Goal 1, Strategy 2 (1.2)

Implementation of Professional Family Development Plans (PFDPs) with resource parents in Regions 1, 2, 3, 4, 5, and 6.

The implementation of PFDPs is expected to improve the ability of resource parents to provide care for the children placed in their home by building on their skills and knowledge. PFDPs are developed with resource parents and based on the unique needs of the specific family. Individualized attention to addressing resource parents' knowledge and skill needs will improve support they receive from CFS. A reduction in unplanned placement changes is an additional anticipated result. Improvements are expected to be seen in Permanency Outcomes 1 and 2, Well-Being Outcome 1, and Systemic Factor 28.

### Goal 1, Strategy 2 (1.2): Benchmarks for Measurement

Measurements and the related performance baseline and goal for implementation for PFDPs will not be defined until implementation occurs in Region 7 in late FFY 2020/early FFY 2021 (CFSR PIP 2.2) and be reported in the 2022 APSR.

### Goal 1, Strategy 2 (1.2): Target Completion Date: FFY 2021

#### 2021 Update for and Progress for Goal 1, Strategy 2 (1.2):

Work on CFSP 1.2 is scheduled to begin as part of the implementation of foster care re-design in the fall of 2020. The Nez Perce Tribe has expressed interest in PFDPs and will be invited to participate in related learning opportunities. Further information will be provided in the Second Annual Services and Progress Report.

### Goal 1(1): Staff Training, Technical Assistance, and Evaluation

The FACS Bureau of Operational Design in partnership with business design contractor Change in Innovation (CIA) will deliver the approved Case Consultation Learning Experience training to child welfare social workers, supervisors, and regional leadership. In-person training will consist of process description, performance expectations, role playing, and direct real-case application (CWT Plan 1, 2, 3, and 4) followed by immediate implementation. Case Consultation training and implementation will be broken into two phases consistent with the implementation of re-designed safety assessment and concurrent planning/case management processes. Case Consultation during the safety assessment phase will be rolled out first followed by case consultation during the concurrent planning/case management phase. A training curriculum for the implementation of PFDPs will be developed with input and support from the Region 6 foster care licensing team who has successfully incorporated their use with resource parents. The Bureau of Operational Design



and CIA will deliver the approved curriculum. Implementation of all revised processes includes a three-month period of follow-up support and coaching.

### **2021 Staff Training, Technical Assistance, and Evaluation Update**

Between April and June 2019, in-person training regarding the use of local and centralized Safety Case Consultation was provided in all seven regions at the time of implementation (CFSR PIP 1.1.5). The curriculum was reviewed and approved by leadership for the Division of Family and Community Services (FACS). Training specialists from the Bureau of Operational Design and regional chiefs of social work provided the training. Child welfare supervisors received in-person training regarding safety assessment coaching and also attended the in-person learning experience for child welfare social workers and supervisors. Performance and measurement standards were incorporated into the curriculum.

In-person delivery of the Case Consultation Learning Experience (CFSR PIP 1.2.1) was completed in all seven regions in October 2019. In preparation for the learning experience, chiefs of social work and regional program managers attended a training of trainers in September 2019 (CFSR PIP 1.1.7). All case carrying child welfare social workers providing case management and/or permanency services as well as psycho-social rehabilitation specialists and supervisors attended. Prior to the in-person learning experience, participants completed mini online modules which provided introductory information to the new processes. In-person training was delivered by the local chief of social work and training specialist from the Bureau of Operational Design. Role-plays and real-time case application activities were included in the learning experience curriculum (CFSR PIP 1.1.13) and performance measurements were discussed. On-site training was immediately followed by three days of on-site coaching support from process and practice subject matter experts to support the transfer of knowledge. The FACS business implementation contractor held daily meetings with child welfare social workers and supervisors to obtain their feedback and reinforce understanding. Daily afternoon meetings for statewide leadership were held to hear feedback and updates from each region as the re-design was implemented. Feedback received throughout the implementation process was used to make real-time adjustments to the curriculum and implementation process.

### **Goal 1 (1): Implementation Support**

Implementation of the case consultation process will occur in each region upon that region's completion of the in-person training. Implementation of the PFDPs will occur in FFY 2021. The Bureau of Operational Design, working with business design contractor CIA, subject matter, practice, and policy experts will provide additional in-person or video conference coaching to ensure knowledge transfer, appropriate skills, process, workflow, and judgement when using the consultation process for three months following training deliver. (CFSR PIP 1.2.2 and 2). CFS is not involved in any evaluation or research activities related to this goal.

### **2021 Implementation Support Update**

To prepare for the implementation of local and centralized Safety Case Consultation, multiple modes of communication (i.e. webinars, video chats, e-mail bulletins, in-person regional meetings)

were used to inform all child welfare staff as to the upcoming changes. Implementation occurred in each region upon receipt of the Safety Assessment Learning Experience in the spring of 2019. Post-implementation support was provided through on-site coaching by a business process analyst or child welfare policy and program specialist for a minimum of three days immediately following the learning experience. Regional child welfare staff were encouraged to use the new safety consultation processes; however, many offices were unable to identify cases to staff. Following implementation in each region, processes, standards, and communication adjustments were made based on lessons learned prior to implementation in the next region. Additional coaching was provided at 30. At 60 days post-implementation, follow-up coaching was provided via video. Additional on-site and/or video-based coaching continues to be provided upon request.

Implementation of ongoing Case Consultation occurred statewide in October 2019 upon receipt of the Case Consultation Learning Experience (CFSR PIP 1.2.1) in each region. For three days immediately following the learning experience, a business process analyst from the Bureau of Operational Design or child welfare program and policy specialist remained onsite to provide coaching to ensure transfer of learning and consistent statewide implementation. Several weeks prior to implementation, chiefs of social work were provided with a list of cases in their region ready for Case Consultation. At least one ongoing case consultation was attempted during three days of onsite coaching (CFSR PIP 1.1.15 and 1.2.2). Additional onsite coaching was provided by a business process analyst to child welfare social workers, supervisors, and chiefs of social work 30 days post-implementation in November 2019. Support included activities such as process clarification, implementation problem solving, and direct individual and group coaching. In December 2019, 60-day post-implementation support was provided to each region based on their individual needs. In total, CFS and the Bureau of Operational Design provided approximately 300 hours of onsite coaching to IDHW's seven regions between October 2019 and January 2020. Additional coaching continues to be provided upon request.

Unanticipated challenges occurred including social workers calling Central Consult for safety consultation when they knew they were not yet ready for a consult but were at the five-day timeframe. This resulted an additional demand on Central Consult subsequently resulting in accessibility issues. Using Agile processes, CFS has addressed identified implementation challenges in real-time. For example, regions experienced significant difficulty with the availability of supervisors and experienced child welfare staff to fill the role of a third-party participants in case consultations. This resulted in a process modification to require third-party attendance once in the first 30 days and once every 90 days thereafter. CFS has actively sought feedback from regional child welfare staff and leadership throughout re-design and implementation. Using feedback received and the monitoring of related performance measurements (CFSR PIP 1.1.7), areas were identified where additional training and/or support have been needed. Individual plans to address regional needs were developed including additional coaching, targeted training, and mentoring.

The Child Safety Assessment and Concurrent Planning Shared Learning Experience further supported implementation and provided an additional feedback loop for revised processes. CFS collaborated with the Administrative Office of the Courts (AOC), Judicial Education Department and

National Center for State Courts develop the curriculum which included information about the revised CFS safety (CFSR PIP 1.1.3) and concurrent planning (CFSR PIP 1.1.6) processes, including case consultation. The curriculum was delivered on a regional/judicial district level statewide between October and December 2019. Delivery was timed to occur in each area shortly after the Case Consultation Learning Experience (CFSR PIP 1.2.1) had been received by child welfare staff. Participants included district child welfare judges, prosecuting attorneys, defense attorneys, and members of the local CASA program as well as child welfare social workers, supervisors, and local leadership from the regional CFS office. Representatives of the Shoshone-Bannock Tribes also attended. Questions, concerns, and feedback received from each session was communicated with the case consultation training and implementation team who made real-time adjustments to related processes and documents.

## **Goal 2: Implement Services to Prevent the Placement of Children in Foster Care.**

*Addresses Safety Outcome 2 and Systemic Factors 29, 30, 31, and 32*

Statewide provision of prevention services is a critical component in maintaining children safely at home whenever possible. Idaho is a rural state and experiences challenges ensuring the availability of these types of services. For this reason, it is critical for the Child and Family Services (CFS) program to collaborate with internal and external partners and stakeholder to implement prevention services.

The Family First Prevention Services Act (FFPSA) passed funding reforms to Title IV-E and IV-B to provide preventative services to families with children who are at risk of entering the foster care system. This will lead to better outcomes for children. Idaho has requested a delay for the implementation of Family First requirement for Prevention and Qualified Residential Treatment Programs (QRTP) until October 2021.

In FFY 2019, Idaho began the development of a Family First Pre-Implementation Plan with the convening of a Visioning Council including IDHW staff and statewide partners and stakeholders (CWT Plan 10; 2019 CIP-Family First Prevention and Services Act Project 1). Partners and stakeholders include:

- Foster youth alumni
- Guardians ad Litem (GAL)
- Resource parents
- Kinship providers
- Idaho Department of Juvenile Corrections
- Idaho Voices for Children
- Idaho Tribes
- Representatives from the Administrative Office of the Courts
- IDHW Division of Behavioral Health
- IDHW Division of Medicaid
- Idaho Children's Trust Fund
- Casey Family Programs

The Visioning Council has met four times and smaller workgroups continue to meet for the development of Q RTPs, In-Home Prevention, Kinship and Prevention in Idaho. The CFS program will utilize the Visioning Council in the successful completion of Goal 2.

### Goal 2 (2): Measure of Progress

Evidenced-based prevention services in the areas of substance abuse, mental health, and parenting will be implemented. Performance data for Safety Outcome 2 will be monitored for progress.

Goal 2 (2): Target Completion Date: FFY 2022

### Goal 2, Strategy 1 (2.1):

Implement evidenced-based services for children who are at-risk of entering foster care and their caregivers in the areas of substance abuse, mental health, and parenting.

### Goal 2, Strategy 1 (2.1): Benchmarks for Measurement

Baseline:	Services not identified	
Benchmark 1:	Evidenced-based service options identified	Date: FFY 2021
Benchmark 2:	Evidenced-based service(s) selected	Date: FFY 2021
Benchmark 3:	Service area identified	Date: FFY 2021
Benchmark 4:	Evidenced-based service(s) implemented	Date: FFY 2022

Goal 2, Strategy (2.1): Target Completion Date: FFY 2022

### 2021 Update and Progress for Goal 2, Strategy 1 (2.1):

Beginning in FFY 2019, Idaho's Vision Council developed a workgroup made up of stakeholders from the Vision Council as well other agencies to develop a plan to implement evidenced-based services. This work group called the "In-Home Services" workgroup has met three times with the following participants:

- CASA
- Foster Parent: Kinship and Non-Relative
- Tribal Partner
- Behavioral Health
- Foster Youth
- Casey Family Programs
- Idaho Department of Health and Welfare (IDHW) Division of Public Health

- Idaho Department of Juvenile Corrections
- CFS: regional and central offices

The workgroup researched services currently rated on the Title IV-E Clearinghouse as well as services currently available in Idaho. They will increase the frequency of meetings as additional services are approved on the Title IV-E clearinghouse. With the passing of the Transition Act, Idaho has identified areas of need to utilize these funds to further implement prevention services in Idaho. This includes contracts for a gap analysis of services in Idaho, a request for information related to prevention services currently in Idaho, increase youth and parent engagement, and increased publicity regarding Idaho's Family First planning. CFS hired a project manager to lead Family First efforts and will hire up to two (2) individuals through contracted services to serve as Family First Specialists. These individuals will work with the FACS Policy team to continue working with stakeholders and further the implementation of services in 2021. The results of the gap analysis will help CFS identify the services to be included in the prevention plan. The contract proposal will be posted in September 2020; however, the results will not be received during FFY 2020. This benchmark is now anticipated to be complete in early FFY 2021.

### Goal 2, Strategy 2 (2.2):

Identify evidenced-based services for pregnant and parenting youth in foster care in the areas of substance abuse, mental health, and parenting.

### Goal 2, Strategy 2 (2.2): Benchmarks for Measurement

Baseline:	Services not identified of implemented	
Benchmark 1:	Evidenced-based service options identified	Date: FFY 2021
Benchmark 2:	Evidenced-based service(s) selected	Date: FFY 2021
Benchmark 3:	Service area identified	Date: FFY 2021
Benchmark 4:	Evidenced-based service(s) implemented	Date: FFY 2022

### Goal 2, Strategy 2 (2.2): Target Completion Date: FFY 2020

### 2021 Update and Progress for Goal 2, Strategy 2 (2.2):

The In-Home Services workgroup continues to identify services for pregnant and parenting youth in foster care in the areas of substance abuse, mental health, and parenting. Nurse Family Partnerships and Parents as Teachers are both well supported on the Title IV-E clearinghouse and are being considered to meet the need for parenting. These services will

be approved through Medicaid, which will be used as the first payor. Final recommendations will be made following completion of further analysis of services which can be built or are available in Idaho and meet clearinghouse requirements. As reflected in the revised goal date in Benchmark 1, this service options will be identified in FFY 2021.

## Goal 2 (2): Staff Training, Technical Assistance, and Evaluation

Training, technical assistance, and evaluation related to Goal 2 are unable to be determined until the evidenced-based service and service area has been identified. This information will be provided in a future APSR.

### 2021 Staff Training, Technical Assistance, and Evaluation Update

The In-Home Services workgroup has identified the need for technical assistance with Idaho's new ESPI system that will assist with the monitoring of prevention caseloads. In addition, the work group will continue to consider and evaluation strategy for services both initially and for ongoing monitoring after implementation. Until the evidenced-based service and service area have been identified this goal cannot be clearly determined. This information will be updated in a future APSR.

## Goal 2 (2): Implementation Support

Implementation support related to Goal 2 is not able to be identified until the evidenced-based service and service area has been identified. This information will be provided in a future APSR. CFS is not involved in any evaluation or research activities related to this goal.

### 2021 Implementation Support Update

CFS is currently developing the scope of work for contracts to complete the evaluation and gap analysis of services. Additional information will be provided in a future APSR.

## Goal 3: Formalize ongoing and meaningful engagement and collaboration with internal and external partners and stakeholders in the development and implementation of the CFSP.

Addresses Systemic Factors 25 and 31

Idaho's engagement of internal and external partners and stakeholders in the development and implementation of the Child and Family Services Plan (CFSP) has often been inconsistent and informal. In April 2019, the Child and Family Services (CFS) program Deputy Division Administrator and a child welfare policy program specialist met with other members of the Idaho State Team, including representatives from the Administrative Office of the Courts (AOC), a child welfare judge, and a representative from the Idaho Children's Trust Fund. The Idaho State Team identified the need to convene a meeting of key child welfare partners and stakeholders to identify cross-cutting issues which present barriers to system-wide child welfare improvements in Idaho (2019 CIP-CFSR PIP III and CFSP Project 4). The meeting will improve understanding of larger systems issues



impacting areas of concern. A multi-system plan to address identified issues will be developed. Identified areas of concern and the developed plan will inform future APSRs.

### Goal 3 (3): Measure of Progress

Key child welfare partners and stakeholders including representatives from multiple child welfare system partners and stakeholders is used to inform the APSR to the 2020-2024 CFSP.

### Goal 3 (3): Target Completion Date: FFY 2022

#### Goal 3, Strategy 1 (3.1):

Convene a team of internal and external partners and stakeholders to inform the development of system-related plans, including the CFSP/APSR.

#### Goal 3, Strategy 1 (3.1): Benchmarks for Measurement

Baseline: Need identified.

Benchmark 1:	Identification of key partners and stakeholders.	Date: FFY 2019
Benchmark 2:	Develop mission and purpose of meeting.	Date: FFY 2020
Benchmark 3:	Convene meeting	Date: FFY 2020
Benchmark 4:	Develop multi-system plan and/or update the 2020-2024 CFSP/APSR informed by the meeting	Date: FFY 2021

### Goal 3, Strategy 1 (3.1): Target Completion Date: FFY 2022

#### 2021 Update and Progress for Goal 3, Strategy 1 (3.1):

Benchmarks 1, 2, and 3 were achieved in FFYs 2019 and 2020. During FFY 2019, Idaho brought together a group of individuals to form the Idaho State team with purpose of informing the development of system-related plans. The group has representation from the CFS program, the AOC, the Idaho Children's Trust Fund, a Deputy Attorney General, and a child welfare judge. The group held several meetings to discuss integration of plans and to inform cross collaboration and development of CFSP/APSR. In March 2020, CFS program representatives met with the other Idaho State Team members in Washington D.C. for a State Team Meeting sponsored by the Children's Bureau. In recognition Idaho is in the early stages of plan implementation, no changes were identified. Partner and stakeholder collaboration in the development and implementation of the CFSP will be further formalized through the establishment of internal and external feedback loops to be captured as policies and procedures in a continuous quality improvement (CQI) manual (CFSP 4).

### Goal 3: Staff Training, Technical Assistance, and Evaluation

No training, technical assistance, or evaluation needs have been identified at this time.

#### 2021 Staff Training, Technical Assistance, and Evaluation Update

No training, technical assistance, or evaluation needs have been identified at this time.

### Goal 3: Implementation Support

Idaho State Team members will discuss implementation support options, including the use of an external resource to facilitate the stakeholder meeting. An update will be provided in future APSRs. CFS is not involved in any evaluation or research activities related to this goal.

#### 2021 Implementation Support Update

The Idaho State Team is developing implementation supports and resources to help facilitate stakeholder meetings. An update will be provided in future APSRs.

### Goal 4: Improve system accountability and organization supports through development and implementation of a statewide continuous quality improvement framework.

#### Addresses Systemic Factors 25

How well is the quality assurance system functioning statewide to ensure that it is (1) operating in the jurisdictions where the services included in the CFSP are provided, (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety), (3) identifies strengths and needs of the service delivery system, (4) provides relevant reports, and (5) evaluates implemented program improvement measures?

The safety, permanency, and well-being of children is a shared responsibility between Idaho's Child and Family Services (CFS) program and external partners and stakeholders. Goal 4 has been updated in the First Annual Progress and Services Report (APSR) to the 2020-2024 Child and Family Services Plan to specify Idaho's Continuous Quality Improvement (CQI) structure will include the follow components:

- **Foundational Administrative Structure.** This structure includes the 40 practice guides and emerging process documents linked to Child Welfare Transformation (CWT) redesigns. CFS has a solid process in which to establish and adjust practice workflows and standards as the work evolves.
- **Quality Data Collection.** This component has been one of great focus in the last two years with both the technology and business design and build. Social workers, supervisors, and leadership have in-time access to data to analyze, coach, and make adjustment at all levels (micro and macro).

- **Case Record Reviews (CRRs).** With federal partner support, Idaho has a robust CRR process mirroring the structure of Child and Family Service Reviews (CFSRs) including paired reviewers, initial, and second level reviewers. The CRR process is documented and updated and trained to routinely, typically prior to a review session.
- **Data Analysis and Dissemination.** Idaho has worked to ensure data is increasingly visible through a variety of modalities and has made it accessible to all child welfare staff. Specific examples are the Subway Map, Performance Dashboards, Accountability Storyboard, and Trending Data Report used by all staff during daily huddles, weekly supervision, and monthly leadership reviews. In July 2020, Idaho began training supervisors, chiefs, and managers to better understand their role in using data in decision making and communicating to their workers in the way of coaching and supervision.
- **Procedures to Enable Feedback to Stakeholders/Decision Makers to Make Adjustments to Programs and Processes.** Idaho has not yet solidified a feedback loop for both internal and external partners. The following partners are to be included in the planning and training as the process is developed:
  - Courts
  - Parents
  - Foster Parents
  - Tribes
  - Service Providers
  - Workers
  - Youth

#### Goal 4 (4): Measure of Progress

Formalize the CQI framework to promote a collaborative process between the agency and stakeholders which focuses on identifying shared goals and activities and establishing a continuous plan to guide statewide CFS improvement efforts and enhance the effectiveness of supervisor training to ensure supervisors have the skills and competencies needed to support ongoing staff development and accountability.

Goal 4 (4): Target Completion Date: FFY 2021

#### Goal 4, Strategy 1 (4.1):

Develop and implement a statewide continuous quality improvement framework and practice to propose, implement, monitor, and adjust for rapid change to implement transformation.

#### Goal 4, Strategy 1 (4.1): Benchmarks for Measurement

Baseline: Informal plan

Benchmark 1: Written policies and procedures. Date: FFY 2021

- Benchmark 2: Develop CFS-Court Data Team to evaluate and analyze data and trends to identify problems and good practices across the state to inform decisions and process designs within CFS and as appropriate in the courts. Date: FFY 2020
- Benchmark 3: Develop measures and performance feedback loops. Date: FFY 2023
- Benchmark 4: Train CFS leadership and supervisors on how to utilize the qualitative and quantitative data in improving performance, operations, and outcomes for children and families. Date: FFY 2021
- Benchmark 5: Develop CQI plan and/or update the 2020-2024 CFSP/APSR. Date: FFY 2021

**Goal 4, Strategy 1 (4.1): Target Completion Date:** FFY 2023

**2021 Update and Progress for Goal 4, Strategy 1 (4.1):**

Benchmark 1: Intended completion is being retargeted from FFY 2020 to FFY 2021. The last year was focused on creating quality data reports that inform the work at all levels. This foundational step needed to be prioritized given where Idaho was developmentally both within business process and technology desire. With quality data solidly built, the focus for the upcoming year will be to collect all data sources and make linkages as to where the data feeds together into a CQI process. These linkages, in addition to an establishment of a feedback loop of internal and internal partners will be captured as policies and procedures in our CQI manual. The manual has been started and serves as a reference to Idaho's CRR references.

Benchmark 2: The CFS-Court Data Team is formed and has convened initial meetings. The next step in rounding out this benchmark will be for the team to create a charter outlining data exchange needs and access and meeting frequency and content. This next step will be the focus on FFY 2021.

Benchmark 3: Idaho created internal measures and feedback loops to all levels (worker, supervisors, and leadership) through:

- Safety and case management quality assurance tools
- Regional Improvement Plans (RIPs)
- Business process redesign performance metrics
- Accountability storyboards

Partnership feedback loops are addressed in the narrative for Benchmark 1. Identified feedback loop partners are:

- Courts
- Parents
- Foster Parents
- Tribes
- Service Providers
- Workers
- Youth

CFS has further clarified steps in achieving Benchmark 3:

In FFY 2021, CFS will review how courts, resource parents, tribes, workers, service providers, and youth are engaged. Idaho will share with these entities what data is available and inquire what data is of interest. Input gleaned will be incorporated into the overall CQI decision making and prioritization process, documented within our CQI manual.

For FFY 2022, members of a statewide CQI team will be identified. Idaho will engage in a process to develop a charter regarding data review and setting mutual interest priorities.

Within FFY 2023, Idaho will research models as to how to best engage parents to gain feedback both in time and through aggregate themes.

Benchmark 4: Ongoing work on leadership and supervisor training related to the use of data to improve outcomes for children and families is planned for FFY 2021. This includes completion of the Child Welfare Supervisor Academy curriculum and Subway Map and Performance Dashboard Training.

A CQI framework is being developed (CFSR PIP 3.1.1) with the above goals and benchmarks to ensure a quality assurance system will be functioning statewide by FFY 2023. Idaho's CQI framework will ensure that it is (1) operating in the jurisdictions where the services included in the CFSP are provided, (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety), (3) identifies strengths and needs of the service delivery system, (4) provides relevant reports, and (5) evaluates implemented program improvement measures by FFY 2023.

#### Goal 4 (4): Staff Training, Technical Assistance, and Evaluation

No training, technical assistance, or evaluation needs have been identified at this time.

#### 2021 Staff Training, Technical Assistance, and Evaluation Update

In FFY 2019, the Division of Family and Community Services (FACS) contracted with Change and Innovation Agency (CIA) to provide business process improvement, training, and implementation support, as well as performance goals and evaluation as part of the Child Welfare Transformation Initiative. The contract will continue through FFY 2022.

## Goal 4 (4): Implementation Support

CFS will assess implementation support needs, including the use of an external resource to facilitate goal benchmarks. An update will be provided in future APSRs. CFS is not involved in any evaluation or research activities related to this goal.

### 2021 Implementation Support Update

In FFY 2019, the Division of Family and Community Services (FACS) contracted with Change and Innovation Agency (CIA) to provide business process improvement, training, and implementation support, as well as performance goals and evaluation as part of the Child Welfare Transformation Initiative. The contract will continue through FFY 2022. Additionally, CFS shifted the way business and technical changes are developed and implemented to an Agile structure. Agile coaches through a contract with Empowered Agility provide support.

## Goal 5: Improve collaboration and planning through quarterly meetings, action plans, and other convenings with tribal representatives.

Addresses Systemic Factors 25 and 31

In FFY 2019, the Division of Family and Community Services (FACS) entered a period of re-design and re-structuring which includes the Child Welfare Transformation (CWT) Initiative (Appendix G). The CWT plan focuses on the re-processing and implementation of all child welfare processes within the CFS program. Shifts in the CFS child welfare policy team resulted in changes in the CFS policy contacts for Idaho tribes. This presents an opportunity to re-evaluate the way in which the program collaborates and plans with tribes on the Child and Family Service Plans (CFSPs), Annual Progress and Services Reports (APSRs), and other plans and projects. Representatives of the Coeur d'Alene Tribe and Nez Perce Tribe expressed interest in working with the Idaho Department of Health and Welfare (IDHW) on the development and implementation of State-Tribe Title IV-E agreements. A need to avoid waiting until the last few months before the CFSP or APSR is due before obtaining tribal feedback and input was also identified. Further improvements were recommended by safety assessment and concurrent planning improvement teams (CFSP PIP 1.1 and CWT Plan 2 and 3) which requested the statewide centralization of ICWA notification efforts.

### Goal 5 (5): Measure of Progress

Tribal feedback and input is integrated into CFS processes and plans in a timely and ongoing way.

Goal 5 (5): Target Completion Date: FFY 2021; ongoing



### Goal 5, Strategy 1 (5.1):

Develop and implement a schedule for meetings, calls, and/or other opportunities for ongoing collaboration between Idaho tribes and CFS throughout the year.

### Goal 5, Strategy 1 (5.1): Benchmarks for Measurement

Baseline: Informal plan.

Benchmark 1: Meetings, calls, and/or other opportunities for ongoing collaboration scheduled with each tribe. Date: FFY 2020

Benchmark 2: Meetings, calls, and/or other opportunities for ongoing collaboration occur with each tribe prior to April of each year. Date: FFY 2021

Goal 5, Strategy 1 (5.1): Target Completion Date: FFY 2020; ongoing

### 2021 Update and Progress for Goal 5, Strategy 1 (5.1):

In February 2020, CFS initiated efforts to schedule individual meetings with each Idaho tribe during the National Indian Child Welfare Conference in April. The conference was subsequently revised from in-person to online due to COVID-19. Plans for in-person meetings were also revised due to COVID-19 related precautions. Attempts have been made through e-mail and phone contact to schedule video-based individual meetings, but success has been limited. Meetings were held with the Coeur d'Alene Tribe in May 2020 and with the Nez Perce Tribe in June 2020. Continued efforts are being made to meet with all other tribes. This experience has emphasized the need to pre-schedule bi-annual visits much earlier each year.

While individual tribal visits have not occurred, CFS has used opportunities including Idaho's Indian Child Welfare Conference in October 2019 and quarterly Indian Child Welfare Advisory Council (ICWAC) meetings to learn about the work each tribe is doing, inquire as to any needs, and provide information regarding CFS program progress and changes.

### Goal 5, Strategy 2 (5.2)

Implement a centralized ICWA notification process within the CFS program.

### Goal 5, Strategy 2 (5.2): Benchmarks for Measurement

Baseline: Centralized ICWA notification dependent on each region.

Benchmark 1: In collaboration with Idaho tribes, identify a centralized process for ICWA notification which meets the needs of tribes and CFS.  
Date: FFY 2021

Benchmark 2: In collaboration with Idaho tribes, develop and/or revise any documents or tools necessary to implement the centralized process.  
Date: FFY -2021

**Goal 5, Strategy 2 (5.2): Target Completion Date:** FFY 2021

**2021 Update and Progress for Goal 5, Strategy 2 (5.2):**

CFS did not meet Benchmark 1 in FFY 2020 as planned. The strategy for development of a centralized process for ICWA notification was to be discussed as part of the annual meeting to discuss the Child and Family Services Plan (CFSP) and Annual Progress and Services Report (APSR) with each tribe. COVID-19 resulted difficulties completing spring 2020 meetings with individual tribes delaying these discussions. In May 2020, a meeting was held with representatives with the Coeur d'Alene Tribe. An individual with their tribal social services office expressed interest in collaborating on the centralization project. Goal dates for Benchmarks 1 and 2 have been revised to FFY 2021.

Despite the delay in meeting with each tribe, progress in the centralization of ICWA processes has been made. In FFY 2019, an administrative position dedicated to completing ICWA notification was moved to the CFS program's state central office from a regional office. The move provided an opportunity to implement some initial changes, including improved documentation and notification follow-up. Better identification of the strengths and challenges of the current process has occurred as a result of the change.

**Goal 5, Strategy 3 (5.3):**

Collaborate with Idaho tribes to develop an ICWA Performance Improvement Plan (PIP) informed by case record review (CRR) results.

**Goal 5, Strategy 3 (5.3): Benchmarks for Measurement**

Baseline: No ICWA PIP

Benchmark 1: Complete an ICWA CRR in collaboration with Idaho tribes.  
Date: FFY 2021

Benchmark 2: In collaboration with Idaho tribes, identify areas needing improvement informed by ICWA CRR results. Date: FFY 2021

Benchmark 3: Draft an ICWA PIP in collaboration with Idaho tribes.  
Date: FFY 2021

Benchmark 4: Finalize an ICWA PIP in collaboration with Idaho tribes.

Date: FFY 2022

Goal 5, Strategy 3 (5.3): Target Completion Date: FFY 2022

**2021 Update and Progress for Goal 5, Strategy 3 (5.3):**

Progress on the completion of an ICWA CRR was not made this year due to prioritization of the design and implementation of revised comprehensive safety assessment, case management, concurrent planning, permanency, and foster care workflow processes. CQI has been embedded into each of the new processes but are not specific to ICWA. CFS has provided regular updates to Idaho tribes regarding the revised processes during Idaho Indian Child Welfare Advisory Council (ICWAC) meetings. Challenges presented by COVID-19 precautions prevented scheduled spring meetings during which the topic was to be discussed. Due to the lack of progress made this year, benchmark and goal completion dates have been updated.

**Goal 5 (5): Staff Training, Technical Assistance, and Evaluation**

No training, technical assistance, or evaluation needs have been identified at this time.

**2021 Staff Training, Technical Assistance, and Evaluation Update**

No training, technical assistance, or evaluation needs have been identified at this time.

**Goal 5 (5): Implementation Support**

Implementation supports have not been identified at this time. An update will be provided in future APSRs. CFS is not involved in any evaluation or research activities related to this goal.

**2021 Implementation Support Update**

Implementation supports have not been identified at this time. An update will be provided in future APSRs. CFS is not involved in any evaluation or research activities related to this goal.

**Goal 6: Collaborate with Tribes in the development and/or implementation of State-Tribe Title IV-E agreements.**

Addresses Systemic Factor 31

In April 2019, the Idaho Department of Health and Welfare (IDHW) and Nez Perce Tribe entered into a State-Tribe IV-E Agreement. The Coeur d'Alene Tribe has expressed interest in developing a IV-E Agreement.

## Goal 6 (6): Measure of Progress

Tribes developing or implementing services through a State-Tribe Title IV-E Agreement receive necessary supports from CFS to continue their efforts.

### Goal 6 (6): Target Completion Date: FFY 2024

#### Goal 6, Strategy 1 (6.1):

Provide support and assistance to the Nez Perce Tribe in accessing Title IV-E funding to implement services through the Title IV-E Agreement.

#### Goal 6, Strategy 2 (6.1): Benchmarks for Measurement

Baseline: State-Tribe Title IV-E Agreement signed.

Benchmark 1: Identify support needed by the Nez Perce Tribe to implement the Title IV-E plan requirements. Date: FFY 2019; Ongoing

Benchmark 2: Address areas of support requested by the Nez Perce Tribe.  
Date: FFY 2019; ongoing

#### Goal 6, Strategy 1 (6.1): Target Completion Date: FFY 2019; ongoing

#### 2021 Update and Progress for Goal 6, Strategy 1 (6.1):

During FFY 2019, the Idaho Department of Health and Welfare (IDHW) met with the Nez Perce Tribe on several occasions to discuss implementation of their State-Tribe IV-E Agreement. Additional meetings were planned for winter and spring 2020 but were not held due to COVID-19. Meetings held included the tribe's fiscal and program teams and were used to identify needed supports. A key challenge for the Nez Perce Tribe is the alignment of their tribal code with IDHW's IV-E plan. The next step is the Tribe's review of the state's IV-E Plan and requirements followed by a mini IV-E audit of tribal cases as well as a review and discussion of foster care licensing requirements. The Child and Family Services (CFS) program will continue to work with the Nez Perce Tribe to identify solutions to the Tribe's confidentiality concerns related to the use of CFS's new Comprehensive Child Welfare Information System (CCWIS) and gathering of AFCARS information while the Tribe continues to rely on a paper system.

#### Goal 6, Strategy 6 (6.2):

Provide support and assistance to the Coeur d'Alene Tribe in their development of a State-Tribe Title IV-E Agreement.

#### Goal 6, Strategy 2 (6.2): Benchmarks for Measurement

Baseline: The Coeur d'Alene Tribe has expressed interest in the development of a State-Tribe Title IV-E Agreement.

Benchmark 1: Identify support needed by the Coeur d'Alene Tribe to develop a Title IV-E Agreement. Date: FFY 2019; Ongoing

Benchmark 2: Address areas of support requested by the Coeur d'Alene Tribe. Date: FFY 2019; ongoing

Goal 6, Strategy 2 (6.2): Target Completion Date: FFY 2019; ongoing

**2021 Update and Progress for Goal 6, Strategy 2 (6.2):**

During FFY 2019, the Coeur d'Alene Tribe has continued to express an interest in pursuing a State-Tribe Title IV-E Agreement. CFS worked with the Tribe to identify needed the fiscal and program information related to the children they serve. CFS provided information on meeting licensing requirements. A Coeur d'Alene Tribe representative completed the training of trainers for pre-service PRIDE training. Plans for him to shadow CFS licensing social workers were delayed due to COVID-19.

The Coeur d'Alene Tribe is working on completing a draft of a State-Tribe IV-E Agreement similar to the Nez Perce Tribe's agreement, but with adjustments to ensure it aligns with their tribal codes. In May 2020, the Tribe reported they are continuing to work toward gathering the necessary fiscal and program information. CFS will continue to provide ongoing support to the Coeur d'Alene Tribe in their progress towards a State-Tribe IV-E Agreement.

**Goal 6: Staff Training, Technical Assistance, and Evaluation**

No training, technical assistance, or evaluation needs have been identified at this time.

**2021 Staff Training, Technical Assistance, and Evaluation Update**

No training, technical assistance, or evaluation needs have been identified at this time.

**Goal 6: Implementation Support**

Implementation supports have not been identified at this time. An update will be provided in future APSRs. CFS is not involved in any evaluation or research activities related to this goal.

**2021 Implementation Support Update**

No training, technical assistance, or evaluation needs have been identified at this time.

## Goal 7: Enhance the professional development of resource parents through training.

Addresses Permanency Outcome 1, Well-Being Outcome 1, and Systemic Factors 4, 6, 12, and 28

Quality initial and ongoing training assures resource parents have the opportunity to build skills to meet the social, emotional, and behavioral needs of children in foster care which will therefore decrease the number of placement disruptions due to a resource parents inability to meet the child's needs. As identified in the Child and Family Services Review (CFSR) Program Improvement Plan (PIP) (2.1.5 and 2.1.6), Child and Family Services (CFS) recognizes the importance of completing an evaluation of resource parent training to identify enhancements to the professional development of foster and adoptive parents, and to clarify expectations related to resource parent training requirements. In addition to an evaluation of pre-service training, the provision of ongoing training opportunities that meets the identified need of resource parents is needed.

### Goal 7: Measure of Progress

CFS will see a decrease in the number of placements disrupted due to the resource parent's inability to meet the child's needs. There will be an increase in the number of families who are retained as foster parents

Goal 7: Target Completion Date: FFY 2021

#### Goal 7, Strategy 1 (7.1) Evaluation of Resource Parent Training

##### Goal 7, Strategy 1 (7.1): Benchmarks for Measurement

Baseline:	Independent Evaluator has not been identified	
Benchmark 1:	Identify Independent Evaluator	Date: FFY 2020
Benchmark 2:	Evaluation Plan Developed	Date: FFY 2020
Benchmark 3:	Evaluation Completed	Date: FFY 2021
Benchmark 4:	Compile and analyze evaluation results	Date: FFY 2021

Goal 7, Strategy 1 (7.1): Target Completion Date: FFY 2021

#### Goal 7, Strategy 2 (7.2): Use evaluation results to plan for training updates

##### Goal 7, Strategy 2 (7.2): Benchmarks for Measurement

Baseline:	Evaluation not completed	
Benchmark 1:	Review results and recommendations	Date: FFY 2021
Benchmark 2:	Develop new training plan	Date: FFY 2021



Benchmark 3: Analyze available training and update contracts  
Date: FFY 2021

Benchmark 4: Analyze current CFS staff training for consistency  
Date: FFY 2021

Goal 7, Strategy 2 (7.2): Target Completion Date: FFY 2021

Goal 7, Strategy 3 (7.3): Implement enhanced training to Resource Parents

#### Goal 7, Strategy 3 (7.3): Benchmarks for Measurement

Baseline: Enhanced training not yet provided

Benchmark 1: Develop implementation plan for resource parents  
Date: FFY 2021

Benchmark 2: Develop implementation plan for CFS staff Date: FFY 2021

Benchmark 3: Implement in Regions 2, 3 and 5 Date: FFY 2021

Benchmark 4: Implement Statewide Date: FFY 2022

Goal 7, Strategy 2 (7.2): Target Completion Date: FFY 2022

## 4) UPDATE ON SERVICE DESCRIPTION

### Stephanie Tubbs Jones Child Welfare Services (CWS) Program (Title IV-B, Subpart 1)

Child and Family Services (CFS) will continue to use Title IV-B, Subpart 1 to protect and promote the welfare of all children in Idaho; prevent the abuse, neglect, or exploitation of children; support at-risk families through services which allow children to remain safely with their families or return to their families in a timely manner; promote the safety, permanence and well-being of children in foster care and adoptive families; and provide training, professional development and support to ensure a well-qualified workforce.

To assist in meeting the goals of Title IV-B, Subpart 1 and Idaho's 2020-2024 Child and Family Services Plan (CFSP), CFS plans to support the following services statewide through use of CWS funds:

#### Protective Services

- Intensive family-based services, including family preservation services
- Parenting classes
- Concrete family supports such as gas vouchers, assistance with utility bills, clothing, and food vouchers
- Legal fees to support permanency such as guardianship fees, paternity establishment, and legal notices
- Substance abuse treatment services -including drug testing
- Mental health services such as psychological evaluations, mental health evaluations, domestic violence evaluation and treatment, and counseling
- Transportation costs to support parent, relative, sibling, and kin visitation
- Water testing
- Interstate Compact for the Placement of Children (ICPC) home studies
- Remediation services to support timely permanency
- Funeral expenses
- Specialized recruitment
- Children's camp
- Non-Medicaid covered medication, medical, dental
- Secure transport
- Interpreter services
- Background checks
- Childcare
- Independent Living Services (after IL monies run out)
- On call services
- Education related fees

**Foster Care Maintenance** (Does not exceed the payment limitation for use of IV-B on maintenance)

- Foster Family and Relative Foster Care Maintenance Services

#### **Administrative Costs**

- Facility and technology services for operation of space and property to support social worker activities

#### **Staff Training**

- Staff attendance at child welfare related conferences
- Staff participation in child welfare related training

### **Services for Children Adopted from Other Countries**

Post-adoption services provided for children adopted from other countries are the same as those provided for children adopted domestically. Child and Family Services (CFS) social workers responding to requests for post-adoption support are familiar with adoption-competent service providers in their communities. They provide referrals to community services and access to services through existing regional and statewide CFS contracts. The type and availability of services varies by region based on the presence of community providers. CFS also offers Post-Permanency Grants (PPGs) which provides flexible funds to adoptive parents to use to provide supports or services related to the needs of their child. To qualify, the child must be under the age of 18 years and have been adopted through a foster care, private, independent, or intercountry adoption. Examples of grants awarded include funds for non-Medicaid covered therapy, educational curriculum for summer at-home learning, moving expenses to maintain a child's permanent placement, and extra-curricular activities.

CFS is developing a contract to provide post-permanency services. Services through the contract were expected to be available in FFY 2019; however, the contracting process was delayed due to the prioritization of the re-engineering of a CFS processes. As part of the larger organization re-design of the Division of Family and Community Services (FACS), a contracts team was developed to develop and monitor contracts for the CFS program. The contracts team is partnering with the Child Welfare Policy and Program Development team to complete a RFP which will be sent out for bidding in spring 2020. Services are expected to be in place summer 2020. Services available through the contract will be available to children adopted privately, including those adopted from other countries.

Children from other countries who enter the foster care system due to a disrupted adoption or due to abuse or neglect are provided with the same full range of services available to any other child entering foster care.

## Services for Children Under the Age of Five

*Describe the activities the state has undertaken since the submission of the 2020-2024 CFSP to reduce the length of time children under the age of 5 are in foster care without a permanent family.*

As part of the concurrent planning (CFSR PIP 1.1.6) design and case consultation (CFSP 2.1) processes implemented in October 2019, all children under the age of five have their cases reviewed every 90 days. Planning with family members, visitation with relatives who are potential placements or supports, and discussions about expectations with foster parents and relatives early in the case are also part of the case management redesign. Implementation of permanency re-design (CWT Plan 4 and 14) will begin July 2020. For children ages birth to three years being adopted by their current relative or non-relative foster family, the period of pre-finalization adoption supervision will be automatically waived from six months to three months. Joint trainings for the re-designed processes and related Comprehensive Child Welfare Information System (CCWIS) modules are occurring in every region around the state.

The state of Idaho continues to provide the Women, Infants, and Children (WIC), Head Start, and Early Head Start programs as well as Navigation Services and Maternal, Infant, and Early Childhood Home Visiting (MIECHV) to families with children under the age of five years old.

Please see "Populations at Greatest Risk of Maltreatment" regarding the activities taken to reduce the length of time young children under the age of five are in foster care without a permanent family.

### Early Head Start (EHS)

EHS is a home visiting and center-based program for children birth to three years and their parents. EHS Family Educators provide services in family homes weekly to support the development of strong parent-child relationships and child development. There are also center-based services where parents can take their children. Developmental screenings are also provided.

### Head Start Preschool Services

Head Start is a center-based preschool for children between the ages of three and five years. The program is designed to meet each child's individual needs while preparing them for kindergarten and life-long learning through play. On-site learning opportunities are provided for parents including parenting classes, nutrition classes, health education, and assistance in furthering education as well as referrals and information about community resources and services.

### Infant-Toddler Program (ITP)

The ITP serves children birth to three years with developmental delays and disabilities and is offered statewide to all children meeting ITP eligibility requirements. The program is governed by federal and state laws, specifically the Individuals with Disabilities Act, Part C, and Idaho Code Title 16, Chapter 1.

The Infant-Toddler Coordinating Council (ITCC) was launched in September 2016. The mission of the council is to advise, assist, and collaborate to build capacity within families through the provision of quality early intervention services. Members are comprised of parents of infants and toddlers with disabilities or children with disabilities aged 12 or younger, and members of various state and community agencies and entities. The vision of the council is to support the ITP in meeting the individualized needs of children birth to three years and in empowering their families to maximize their growth and development. CFS has active membership in the ITCC.

CFS and ITP are both part of the Division of Family and Community Services (FACS). Coordination of services for children involved with both programs is addressed in the CFS practice standard for Birth to Three Mandatory Referrals on Substantiated Reports which was updated in December 2016. The standard requires CFS to refer all children birth to three years, who have been the subject of a substantiated report of maltreatment, to ITP including children placed in foster care and children receiving in-home services.

The CFS program works in close collaboration with ITP to ensure ongoing education and supports are provided to biological families, foster families, children, community partners, and staff. CFS and ITP meet regularly to discuss upcoming collaborative staff training, data analysis, as well as how to support birth parents and foster families working together to support ITP services.

### Resource and Service Navigation Program

The Resource and Service Navigation Program works with individual families and communities to establish stability, avoid crises, and prevent child abuse and neglect. Navigators work in each region of the state to:

- Identify and develop resources and services that help individuals and families meet their basic needs and reach attainable goals.
- Develop personalized service plans with individuals and families that outline specific goals and action steps.
- Organize and actively case-manage service plans.
- Work with communities to develop or assist in the stabilization of assets and resources.
- Provide assistance to families in need so that children can continue to be cared for in their home or the home of a relative.

CFS refers families to Navigation for services which to meet the needs of parents and relatives thereby assisting in the reduction of time a child remains in foster care without a permanent home. Navigation services also address the developmental needs of children in foster care or children receiving in-home services. Since April 2015, functionality in the Statewide Automated Child Welfare System (SACWIS) automated referrals from CFS to Navigation. Idaho's Comprehensive Child Welfare Information System (CCWIS) will continue to automate referrals.

In 2019, the Navigation Program was awarded the Federal Kinship Grant. The purpose of this grant is to create an enhanced and sustainable kinship program that aligns and has fluidity with

CFS to provide support to all kinship families, including providing informal support and kinship families providing formal foster care. Targeted activities include: developing enhancements within the data platform to support collaborative work, documentation, and information sharing for kinship care families between Navigation and Child Welfare programs. More information is found in the section of Kinship Navigator Funding.

### Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV)

The Idaho Department of Health and Welfare's Division of Public Health implemented an evidence-based home visiting program matching parents with trained professionals during or after pregnancy and throughout the child's first years. Infants and toddlers identified at greatest risk of maltreatment are prioritized for the program. CFS and the MIECHV program are in the early stages of developing a process for data sharing to identify the effectiveness of services provided to families through early home visiting.

### Women, Infants, and Children Program (WIC)

WIC is a supplemental nutrition program for women and their children up to the age of five years. The program provides nutritious supplemental foods, support for breastfeeding, as well as nutritious education and referrals to health care services at no cost to eligible families.

### Efforts to Track and Prevent Child Maltreatment Deaths

Understanding the circumstances causing a child's death is one way to prevent the deaths of other children. Information from the annual death review of child maltreatment fatalities informs law enforcement, prosecutors, child protection social workers, administrators, legislators, and parents why children die.

Annually, all deaths of children suspected to be a result of child maltreatment are reviewed by a multi-disciplinary state child fatality review team to prevent harm to other children. The review should lead to an understanding of risk factors, better system coordination, and lead to effective recommendations and actions to prevent deaths and to keep children healthy, safe, and protected.

Child and Family Services (CFS) in collaboration with the Governor's Task Force on Child at Risk (CARTF) continue to convene a multidisciplinary team (MDT) to review child deaths. The team was formed by the Governor's Task Force on Children at Risk, under Executive Order 2012-03 to review deaths to children under the age of 18, using a comprehensive and multidisciplinary process. The team is tasked with identifying information and education that is needed to improve the health and safety of Idaho's children. Their goal is to identify common links or circumstances in these deaths that may be addressed to prevent similar tragedies in the future. The team prepares an annual report that summarizes the findings of the child fatality review team. The report and information about the Child Fatality Review Team can be found at the following web address: <https://www.idcartf.org/child-fatality-review-team>. The report is shared with stakeholders and presented at annual MDT meetings and conferences.



During FFYs 2019 and 2020 the following actions and collaborative efforts were made advancing child health and safety in Idaho:

**Call 9-1-1 immediately at first sign of distress**

In a medical emergency, seconds count and first responders are trained to save lives. When severe injury or illness occurs, react quickly. Call 9-1-1 first and avoid self-transporting children to hospital.

**Expand access to mental health services**

Some child deaths are linked to mental health concerns of the parent, caretaker, or the child. Improving access to high quality treatment and reducing social stigma of seeking care may help prevent suicide and homicide deaths as well as accidental deaths resulting from inadequate child supervision.

**Invest in underserved populations in rural communities**

Improve access to medical treatment facilities, Emergency medical/first responder services and public health education in geographically isolated regions. Rural families may benefit from community-based primary prevention programs and services with targeted messaging on topics like parenting/infant care, suicide prevention, early childhood education, and safe driving habits.

**Expand home visiting programs**

Home visiting programs have proven successful at helping families create nurturing, healthy households. Programs like those offered through the Division of Public Health, local public health agencies, and non-profits offer referrals for resources like infant and childcare, home safety planning, nutritional support, CPR training, housing assistance, and referrals for help with substance abuse or mental health concerns.

**Follow infant safe sleep practices**

Unsafe sleep environment is closely associated with sudden unexplained infant death. Parents and caretakers should be made aware of and comply with American Academy of Pediatrics (AAP)'s safe sleep recommendations related to sleep surface (in infants' own cribs, uncluttered with toys or thick bedding) and sleeping position (on their backs).

**Use seat belts or age-appropriate safety seats**

Using lap and shoulder seat belts or properly installed infant safety seats or booster seats prevents severe injury and death in motor vehicle accidents.

**Follow safe gun handling practices**

Store ammunition and firearms separately, in a secure location. Keep weapons, keys and passcodes away from young children and those with a history of mental health concerns.

### **Store medications safely**

Securely store medications and other toxic substances out of children's reach. Use child safe containers for prescription and over-the-counter (OTC) drugs. Safely dispose of unused prescription medications.

### **Improve prescribing practices**

Health providers should follow Centers for Disease Control and Prevention (CDC)'s recommendations for reducing abuse of opioids and other prescription medications.

### **Facilitate interagency cooperation**

Law enforcement officers, medical providers, coroners, social workers, and public health officials are encouraged to work together to support at-risk families as well as in investigating child welfare concerns. Those who work with children should be familiar with the state's mandatory reporting requirements (Idaho Code 16-1605) and report concerns to Idaho Department of Health and Welfare.

### **Child Death Investigation Training**

In early 2019, CARTF funded Child Death Investigation training for all county coroners in Idaho, citing findings and recommendations from the CFR Team. Investigation tools including Sudden Unexplained Infant Death (SUID) dolls for reenactments were provided to all participants.

### **Adverse Childhood Experience's (ACEs) Screening**

Adverse Childhood Experiences, also known as ACEs, are stressful or traumatic events that occur during childhood and have been linked with negative, long-term effects on health and wellbeing. The Idaho Department of Health and Welfare (IDHW)'s Maternal and Child Health (MCH) program partnered with St. Luke's Health System to offer a quality improvement project to Idaho primary care providers in support of ACE score screenings for parents of infants and young children. Resources are provided to parents as a prevention tool to break the cycle of intergenerational toxic stress and trauma and to build resiliency. In 2019, the ACEs and Resiliency Learning Collaborative had 45 providers at 20 sites in 12 cities participating across Idaho. In 2020, the goal is to increase perinatal provider enrollment.

### **Safe Sleep Initiatives.**

The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program is partnering with the MCH Program to complete a statewide continuous quality improvement (CQI) project, aimed at improving safe sleep rates for infants enrolled in MIECHV-funded programs. The project will provide safe sleep education and training for home visitors throughout the state. MCH also provides safe sleep resources for families, including swaddle sacks, sleep sacks, cribs, safe sleep pledges, and brochures. During 2020, MIECHV will track the percentage of infants under one year old enrolled in home visiting who always comply with safe sleep recommendations. Additionally, Idaho MIECHV will measure and track changes in family knowledge before and after safe sleep education.

### **Safe Sleep Message Campaign**

During Safe Sleep Awareness Month in 2019, MCH ran a Safe Sleep social media campaign which included an animated 15 second public service announcement (PSA), with the messaging “Alone. Back. Crib. Every Nap. Every Night”. The program also created an educational brochure and re-designed the IDHW website to include information for parents, caregivers, childcare providers, and health care providers. In addition, the program sponsored the “Alone, Back, Crib Guy” walking tour to raise safe sleep awareness. Ada County Paramedics hosted the tour and provided swaddle sacks.

### **New Funding for Home Visiting Programs**

The Idaho State Legislature appropriated \$1.6 million to support home visiting program expansion. The seven health districts expanded home visiting programs using the Parents as Teachers evidence-based program while one district launched an Infant and Early Childhood Mental Health home visiting program. Research demonstrates that evidence-based home visiting programs prevent child abuse and neglect, encourage positive parenting practices, promote child development and school readiness, improve the health of families and their children, and improve families’ economic self-sufficiency. Home visiting is also a proven strategy for addressing ACEs and building resiliency within a family.

### **Maternal Mortality Review Committee**

In 2019, the Idaho legislature passed a bill to create a Maternal Mortality Review Committee (MMRC). The MMRC will perform a multidisciplinary review of pregnancy-related and pregnancy associated deaths to identify trends and risk factors, provide recommendations to guide preventive measures and strategies, and disseminate the findings and recommendations to individuals and organizations. The goal of the MMRC is to learn from and prevent future maternal deaths. The first review will be held in March 2020 and an annual report will be provided to the legislature.

### **Idaho Suicide Prevention Program**

Reducing death by suicide of Idaho youth and young adults continued to be a high priority for the IDHW Division of Public Health during 2019. IDHW provides funding and support to the State Board of Education through the Idaho Lives Project to implement prevention, intervention, and post-intervention to schools across the state. Regional Coordinators work closely with individual schools to implement suicide-safer school policies and practices. The Regional Coordinators currently support up to 30 schools to develop and implement a plan to conduct suicide prevention trainings.

CFS also compares fatality data from the CFS program with the IDHW Division of Vital Statistics for all children younger than 18. The Division of Vital Statistics confirms all fatalities reported by child welfare via the state’s Statewide Automated Child Welfare Information System (SACWIS) and provides the number of fatalities for all children for whom the cause of death is homicide. The data collected from Idaho’s SACWIS system and the Division of Vital Statistics is used to compile complete and accurate information on child maltreatment deaths for Idaho’s National Child Abuse and Neglect Data System (NCANDS) reporting.

## Promoting Safe and Stable Families (PSSF) (Title IV-B, Subpart 2)

In addition to services described in Item 29: Service Array, Child and Family Services (CFS) plans to support the goals of the 2020-2024 Child and Family Services Plan (CFSP) by the provision of the types of services below through the use of PSSF funds. Each of the services noted is currently available in each region; although the accessibility and quality of the service varies depending on community providers.

### Family Preservation

PSSF Family Preservation funds are used for services to support maintaining children safely in their homes or with relative caregivers and/or to prevent re-entry to foster care. CFS expects to utilize 24% of PSSF funds in this category in FFY 2021 in support of meeting CFSP Goals 1 and 2. Family Preservation services include:

- Childcare
- Concrete supports such as clothing, personal care, food, door alarms, and furniture
- Domestic violence and anger management evaluation and treatment
- Education-related fees
- Family counseling
- In-home relative caregiver supports
- Intensive family-based services, including family preservation services
- Interpretation
- Legal fees
- Medical, dental, and prescription services
- Mental health evaluation and treatment
- Parenting classes/books
- Substance abuse services
- Transportation
- Trauma-informed treatment and support services
- Foster family respite
- Paternity testing

### Family Support

PSSF Family Support funds are used for services to support parents and resource parents. CFS expects to utilize 25% of PSSF funds in this category in FFY 2021 in support of meeting CFSP goals 1 and 2. Family Support services include:

- Concrete supports for relative caregivers
- Education-related fees
- Extra-curricular activities for children
- Family counseling
- Medical, dental, and prescription care
- Mental health evaluation and treatment
- Private parent, relative, and kin home studies and placement supervision

- Transportation/gas
- Trauma-informed treatment and support/intervention
- Visitation support
- Childcare for resource parents
- Respite
- Clothing and personal care
- Parenting classes
- Intensive family-based services, including family preservation services.

### Reunification

PSSF Reunification funds are used for foster care cases with a primary plan of reunification. CFS expects to utilize 30% of PSSF funds in this category in FFY 2021 in support of achieving CFSP goals 1 and 2. Reunification services include:

- Concrete supports such as clothing, personal care, food, door alarms, and furniture
- Domestic violence/anger management evaluations and treatment
- Education-related fees
- Intensive family-based services
- Medical, dental, and prescription services
- Mental health evaluation and treatment services
- Parenting classes
- Substance abuse services
- Supervised visits/parent coaching
- Transportation
- Trauma-informed treatment and support
- Family Group Decision Making
- Interpretation
- Paternity Establishment
- Housing/Hotel fees
- Children's Village Placement
- Daycare
- Foster parent respite
- Legal fees
- Visitation
- Concrete supports such as clothing, personal care, food, door alarms, and furniture
- Housing supports such as rent, utilities, and home repairs

### Adoption

PSSF Adoption funds are used for foster care cases with a primary plan of adoption to support the achievement of permanency through child and family support and activities identified through the Adoption Call to Action and to support adoptive family's post-finalization. CFS expects to utilize

20% of PSSF funds in this category in FFY 2021 in support of CFSP goals 1 and 2. Adoption services include:

- Adoptive parent/pre-adoptive parent support services
- Day care per adoption agreements
- Adoption preparation and pre-placement services
- Bonding and attachment activities
- Child-specific recruitment
- Education-related fees
- Legal fees
- Mental health evaluation and treatment
- Post-adoption services such as childcare, counseling, and family-based services
- Private adoption home studies and placement supervision
- Trauma-informed treatment and support
- Clothing and personal care
- Non-Medicaid covered medication
- Dual Home Studies through contract
- Social History Contract
- Dental
- Child-specific recruitment

### **Service Decision-Making Process for Family Support Services**

The Child and Family Services (CFS) program uses Promoting Safe and Stable Families (PSSF) funds to provide a variety of services and are therefore allotted to each of the seven regions. The regional program manager identifies services needed in the categories of Family Preservation, Family Support, Time-Limited Family Reunification, and Adoption Promotion. They have been provided with the definitions of each of the four PSSF categories and are aware that a minimum of 20% of PSSF funding should be spent in each category. After region-based service providers are selected through a competitive bidding process, a contract is signed. The money allotted in contracts does not exceed the PSSF funds allotted to the service. Budget reviews are held quarterly to monitor the process and use of the PSSF funds. The following services are provided with PSSF funds:

- Intensive family-based services, including family preservation services
- Parenting classes
- In-home services to facilitate reunification or preserve placement: gas, emergency assistance, case management
- Transportation
- Mental health and anger management evaluations and treatment services
- Concrete supports such as cribs, door alarms, or clothing for a non-foster child to avoid bringing a child into foster care
- Counseling services, including intensive family-based counseling
- Foster parent/relative caregiver support
- Visitation/parent coaching



- Substance abuse support and coordination

Table 4.1 Planned spending for Title IV-B, Subpart 2

Promoting Safe and Stable Families (PSSF) Category	Estimated Percentage of Funds for FFY 2020	Rationale
Family Preservation Services	24%	Estimated expenditures for FFY 2020 are in line with historical expenditure trends within these categories
Family Support Services	25%	
Time-Limited Family Reunification Services	30%	
Adoption Promotion and Support Services	20%	

### Populations at Greatest Risk of Maltreatment

The Child and Family Services (CFS) program has identified children age birth to five-years old as being the population at greatest risk for maltreatment. The identification of this population as being at greatest risk was made in consideration of Idaho child welfare data. Children birth to five years old make up just over 26% of Idaho's general child population. However, they accounted for more than 48.6% of the substantiated child abuse and neglect cases received during FFY 2019 (Table 4.1 and 4.2), and account for 43% of children in foster care during FFY 2019 (Table 4.3). This population has been consistently identified at greatest risk of maltreatment in Idaho for several years. Idaho considered populations in relation to race/ethnicity and geographic location but did not find the data to be statistically significant. No other populations have been identified at greatest risk. There is no other notable trend in the data for this at-risk population.

Table 4.2 Maltreatment Substantiations (age 0-17)

FFY 2019 Child Population vs. Children with Substantiated Cases									
Population Estimates*					Substantiated Children				
Ages 0-17	Ages 0-5	%	Ages 6-17	%	Ages 0-17	Ages 0-5	%	Ages 6-17	%
448,553	116,159	6.5	332,394	18.6	1,852	895	48.3	957	51.7

FFY 2018 Child Population vs. Children with Substantiated Cases									
Population Estimates*					Substantiated Children				
Ages 0-17	Ages 0-5	%	Ages 6-17	%	Ages 0-17	Ages 0-5	%	Ages 6-17	%
439,385	113,785	6.5	325,600	18.6	1,892	919	48.6	973	51.4

Table 4.3 Maltreatment Types (age 0-17)

FFY 2019 Substantiations by Maltreatment Type			
	Ages 0-17 (Total)	Ages 0-5	Ages 6-17
Neglect	1,301	753	548
Physical Abuse	321	86	235
Sexual Abuse	136	14	122
Failure to Protect	53	26	27
Health Hazard	31	14	17
Failure to Supervise	24	13	11
CP Expansion	5	0	5
Felony: L&L	1	0	1
Other	0	0	0

FFY 2018 Substantiations by Maltreatment Type			
	Ages 0-17 (Total)	Ages 0-5	Ages 6-17
Neglect	1,437	804	633
Physical Abuse	332	93	239
Sexual Abuse	109	13	96
Failure to Protect	33	12	21
Health Hazard	0	0	0
Failure to Supervise	7	5	2
CP Expansion	0	0	0
Felony: L&L	7	5	2
Other	1	0	1

Table 4.4 Age 0-5 Population in Foster Care

0-5 Population Percentage of Total Foster Care Population				
	FFY 2016	FFY 2017	FFY 2018	FFY 2019
Number of Children in Foster Care (09/30)	1525	1604	1815	1785

Number of Children Age 0-5 in Foster Care (09/30)	671	738	835	750
	44%	46%	46%	42%
Number of Children Age 6-17 in Foster Care (09/30)	854	866	980	1035
	56%	54%	54%	58%

In addition to the services covered in Services for All Idaho Children Under the Age of Five, CFS provides the following services to this at-risk population:

### Concurrent Planning

A concurrent plan is developed for all children who come into the custody of the Idaho Department of Health and Welfare (IDHW). Many infants are adopted by the relative or non-relative family with whom they are placed at the time of removal. For infants and toddlers, efforts are made to have frequent visitation (several times a week or not daily) in the resource family's home. This gives an opportunity for the resource family to develop a relationship with the child's parent(s), as well as an opportunity for teaching, coaching, feedback, and evaluation of parenting behaviors and skills. In recognition of the impact of child welfare timeframes on the development and attachment of young children, CFS is streamlining concurrent planning and permanency processes. Ongoing re-assessment of safety is built into the structured case consultation process implemented in October 2019 which is expected to reduce permanency timelines for all children in care. Activities including the selection of alternate permanent placements for children remaining in care six months after foster care entry, automatic use of waivers to reduce the adoption supervision time for children aged three and younger who are being adopted by their current placement, and the hiring of case aides to support relative search and engagement during the first 60 days of a case are expected to further reduce the length of time children birth to five remain in foster care.

### Priority Response Guidelines

Priority Response Guidelines are in effect for all reports of child abuse or neglect. All allegations of physical abuse of a child birth to six years old are considered a priority one (requiring immediate response), unless there is reason to believe the child is not in immediate danger.

### Kinship Navigator Funding (Title IV-B, Subpart 2)

Idaho's Kinship Navigation program is managed through the Resource and Navigation Program. A plan was developed for the use of funds received.

1. Create an enhanced and sustainable Kinship Program that aligns and has fluidity with Child and Family Services (CFS) to provide support to all kinship families, including those providing

informal support and kinship families providing formal foster care. Targeted activities include: develop enhancements within the data platform to support collaborative work, documentation, and information sharing for kinship care families between the Navigation and Child Welfare programs.

### 2021 APSR Update

Idaho has made enhancements to the current database and is in the initial stages of exploring and researching the capabilities of other database programs to identify which system will be the most effective in supporting collaborative work, documentation, and information sharing. Service Integration leadership have worked collaboratively with CFS leadership to identify specific ways in which the two programs can partner earlier and more collaboratively when families come to the attention of CFS. Service Integration leadership has provided training for CFS staff on identifying opportunities to partner and work in collaboration to support families. These efforts will be ongoing.

2. **Provide direct assistance to kinship providers and children to facilitate linkage to services, resources, supports, and information with the goal of stabilizing and strengthening families. Targeted activities include: collaborate with internal Department and external community partners to raise awareness of knowledge of needs and to kinship families through targeted outreach to inform them of the availability and accessibility of resources and supports & enhance the existing 2-1-1 software platform to augment the statewide information system and service coordination for kinship care families.**

### 2021 APSR Update

Idaho has implemented ongoing activities to further raise awareness of the knowledge of the unique needs of kinship families. Two focus groups were convened to further inform the identification of needs, gaps, and efforts in our next steps. One of focus group was comprised of kinship providers and included gathering information related to resources, needs, gaps in resources, as well as accessibility to information and support via the 2-1-1 website. Through a partnership with United Way, a focus group with professionals was completed to further inform Idaho of the accessibility level to resources via the 2-1-1 website. The Kinship Navigation Program has participated in outreach activities through community events, conferences, and trainings to strategically promote awareness. Opportunities to create and display signage to inform communities about 2-1-1 and resources for kinship families are being actively researched. Participation with key statewide partners serving kinship families including kinship coalitions and groups, the Center for the Study of Aging through Boise State University, the Area Agency on Aging, Casey Family Programs, and the Caregivers' Alliance, have continued. Additionally, Idaho's Kinship Navigation Program partnered with other states to share information, as well as stay informed of the status and development of the progress with their kinship work.

In December 2019, the 2-1-1 database platform was transitioned to an enhanced platform. The 2-1-1 leadership continues to actively work towards implementing database

enhancements to further augment the statewide information system and service coordination for kinship families.

3. **Raise awareness for and on behalf of kinship families to support skills and knowledge acquisition for kinship families across the state (e.g. support groups, workshops/training, information pamphlets, resources libraries). Targeted activities include: increase targeted kinship resources for the Family and Community Services library (operated through 2-1-1) to include individualized educational materials and supports for children, youth, and kinship providers & develop a comprehensive resource directory for kinship families to enhance the awareness of, ease, and accessibility to supports for kinship families.**

#### **2021 APSR Update**

Idaho's Kinship Navigation Program researched and ordered information pamphlets and educational materials for the Division of Family and Community Services (FACS) library to support the unique needs of kinship families. An array of books and videos addressing the needs of kinship providers, children, and youth; including information on parenting through ages and stages, transitions, mental health and wellness, substance abuse, emotions, supporting well-being, and the Trust-Based Relational Intervention video series have been ordered. The Kinship Navigation Program is the process of working with Child and Family Services (CFS) leadership to update library resources geared towards supporting child welfare staff in their work with kinship families. Additional parenting resources and supports are being explored.

4. **Develop outreach and enhanced resource coordination to better organize and maintain a cohesive statewide network of community partner agencies who will improve the ease of access and accuracy of information for kinship families in Idaho. This will be planned in collaboration with kinship caregivers and the organizations representing them; youth raised by kinship caregivers; schools; and relevant community, faith-based, and government agencies. Targeted activities include: work with internal Department and external community partners to increase their knowledge of the needs of and to create sustainable resources for kinship families that include supports in applying for and accessing resources (including the TANF grant, legal, guardianship, and adoption supports).**

#### **2021 APSR Update**

As mentioned under Kinship Navigation Goal 2, Idaho has continued to actively collaborate with key statewide partners serving kinship families including kinship coalitions and groups, the Center for the Study of Aging through Boise State University, the Area Agency on Aging, Casey Family Programs, and the Caregivers' Alliance. Collaborative efforts underway to re-establish a formalized statewide kinship coalition and the program has taken an active role in that process. Strategic work and partnering with schools to identify and support kinship providers, children, and youth was completed. The Kinship Navigation Program continues to work closely with internal partners, including the Child and Family Services (CFS) program to identify ways to provide further support to families early on in their process. Specific needs for additional and updated legal resources for our kinship families have been shared with legal

partner. A legal frequently asked questions (FAQ) sheet is being developed and dialogue is happening with legal partners on creation of videos on custody, guardianship, and adoption. Awareness of the child-only TAFI grant continues to be promoted and efforts to identify strategies to ease the related application process are being made.

5. **Create and provide sustainable and ongoing professional development resources for staff to enhance services provided to and outcomes for kinship families. Targeted activities include: develop and implement sustainable professional development opportunities and resources for staff that are individualized and targeted to their roles with kinship families; including 2-1-1 agents, Navigators, Child Welfare Social Workers, and program leadership.**

#### **2021 APSR Update**

Andrea B. Smith, Ph.D., a professor and expert in kinship, provided training to the Resource and Navigation staff and some child welfare staff in April 2020. Dr. Smith will provide a targeted training for the 2-1-1 team in the summer or early fall of 2020. The Kinship Navigation Program's Community Resource Development Specialist attained her graduate certificate in Kinship Care from Western Michigan University, and has been designated as our program's subject matter expert in kinship. Kinship books were purchased for all the Navigation staff to continue enhancing their professional development. An outline for the ongoing review and discussion of the book has been created, and Navigators have ongoing facilitated discussion on their progress and the concepts in the book.

6. **Develop the evaluation component to establish baseline data through the evaluation of activities to inform services, next steps, and approval of acceptance in to the Title IV-E Prevention Services Clearinghouse. This will encompass consultation to provide recommendations on strengthening the services and fluidity between Navigation and Child Welfare to streamline supports for kinship families. Targeted activities will be determined after the Children's Bureau has released additional information on the Title IV-E Prevention Services Clearinghouse and evaluation requirements. The targeted activities will include providing an update in Idaho's APSR in 2020.**

#### **2021 APSR Update**

After the evaluation requirements were released, Idaho made the decided to focus on enhancing kinship navigation supports and services, rather than establishing an evidence-based program. This is something that we will further explore and research later in the future. The Kinship Navigation Program has been working with an internal evaluator on some of the activities for effectiveness, rather than attempting to establish an evidence-based program. Initially, \$74,000 was allocated towards this activity; however, the amount will be substantially less due to the decision to focus solely on enhancements. Some of the allocation has been shifted towards adding more kinship resources within the Family and Community Services (FACS) library.



## Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits

Table 4.5 Monthly Caseworker Visits by FFY

Caseworker Visit Measures	National Standard	FFY 2017 Idaho Performance	FFY 2018 Idaho Performance	FFY 2019 Idaho Performance
Aggregate Number of Children in Population		2,413	2,569	2,711
Number of Visits That Would Occur if Each Child Were Visited Once Per Month While in Care		17,470	18,995	20,502
Number of Monthly Visits Made to Children		16,889	18,075	19,595
Percent of Visits Made on a Monthly Basis by Caseworkers to Children in Foster Care	95%	97%	95%	96%
Number of Monthly Visits Made to Children		16,889	18,075	19,595
Number of Monthly Visits Made to Children That Occurred in the Child's Residence		13,113	13,699	14,855
Percent of Visits That Occurred in Child's Residence	50%	78%	76%	73%

\*\* Confidence Level: 95% Margin of error: +/- 5%

Monthly Caseworker Visit grants are provided to states to improve the quality of caseworker visits with an emphasis on improving caseworker decision-making on the safety, permanency, and well-being of foster children and caseworker recruitment, retention, and training. Idaho requires monthly face to face contact with children who are in foster care under the responsibility of the state. Idaho's practice standard which includes practice requirements around child contacts can be found at the following

link: <http://healthandwelfare.idaho.gov/Portals/0/Children/AdoptionFoster/Contact.pdf>

Idaho plans to use caseworker visit grant funds as follows:

- To research and implement technology for caseworkers in the field to increase the timeliness and accuracy of the documentation of completed caseworker visits with children

- To train and implement a statewide standardized format for documentation of caseworker visits with children
- To implement a statewide standardized quality assurance process for administrative and supervisory review of both the frequency and the quality of caseworker visits with children. This will be achieved using standard data reports and a system of accountability for monitoring contacts to ensure workers consistently achieve at least 95 percent of the required visits

### **2021 APSR Update**

Wireless technology in remote field offices was installed to increase direct access to the child welfare information system for workers in the field. The Child and Family Services (CFS) program has provided documentation training to all regions of the state to promote a structured documentation format for monthly contacts. CFS conducts statewide quarterly audits of worker contacts with children in foster care, and requests supervisors implement corrective action plans for any worker who does not meet the requirements for monthly face-to-face contact. Supervisors have been able to access worker contact reports in the Statewide Automated Information System (SACWIS) at any time to monitor their worker's contacts. This ability will continue with the implementation of the new Comprehensive Child Welfare Information System (CCWIS).

As part of the Child Welfare Transformation Plan and updates to our CCWIS system (ESPI), CFS is making changes to the format of monthly case worker narratives. A new monthly narrative template will be implemented in the system which captures a section for monthly progress on safety, permanency, well-being, case plan progress, ad current recommendations and next steps. These changes will be implemented in April 2020.

### **Adoption and Legal Guardianship Incentive Payments**

Idaho was awarded a total of \$56,500 in Adoption and Legal Guardianship Incentive payments between FFY 2015 and FFY 2019. Funds have been spent in the following areas:

- Child-specific recruitment contract for Idaho's Wednesday's Child
- In-home support services
- Adoption subsidy support
- Administrative costs

In FFY 2021, Child and Family Services expects to use Adoption and Legal Guardianship Incentive payments to continue to support child-specific recruitment contracts and post-permanency services. There is a balance of \$7,500 remaining from the FFY 2017 award which needs spent prior to September 2020. No challenges exist in the spending of these funds which will be utilized to support permanency-related services for children and families.

The Child and Family Services (CFS) program identified a desire to use the funds to support post-permanency services early on. This decision represented a new way for Idaho to leverage these funds, and community and organizational infrastructure and processes to support it were not in place. CFS recognized the importance of incorporating internal and external partner and

stakeholder feedback in the development of post-permanency services as it was essential to target those services believed to be most beneficial to Idaho families. A workgroup to explore the issues was convened in FFY 2016 and survey of adoptive and guardianship families receiving adoption and guardianship assistance benefits completed in FFY 2017. Reviews of research, national data and post-permanency services in other states were conducted. This information was combined with the feedback received from the post-adoption workgroup and 2017 survey to identify which specific services CFS would target for inclusion in the post-permanency program to be developed. Community-based post-permanency services are limited in the state. To assist in the estimation of the cost of a post-permanency contract, a Request for Information was completed in early FFY 2018. Due to the high cost estimations resulting from the RFI, need to re-assess necessary post-permanency services, and program prioritization of rebuilding all CFS processes, beginning with safety assessment, the contract process was delayed. Statewide services through a post-permanency contractor are now expected to begin in FFY 2020. Monies received from incentive awards have been identified as one source of funds for the developed services.

### Adoption Savings

The Child and Family Services (CFS) program provides Post-Permanency Grants (PPGs) using Adoption Savings. These grants provide flexible funds to adoptive parents to provide supports or services to their child. To qualify, the child must be under the age of 18 years and have been adopted through a foster care, private, independent, or intercountry adoption. Examples of grants awarded include funds for non-Medicaid covered therapy, educational curriculum for summer at-home learning, moving expenses to maintain a child's permanent placement, extra-curricular activities, and trauma-informed training for the adoptive parent.

CFS is developing a contract to provide post-permanency services. Services through the contract were expected to be available in FFY 2019; however, the contracting process has been delayed due to program prioritization of re-building of all child welfare processes. The Division of Family and Community Services (FACS) developed a new contracts team for the development and monitoring of division contracts, including those which provide services for the CFS program. A Request for Proposal (RFP) has been finalized. A contract is anticipated to be in place by January of 2021. Unused Adoption Savings calculated from previous years and future calculated savings will be used to help fund these services.

Idaho is using the same Adoption Savings calculation method and procedures for the current FFY as used in our latest FFY reporting period submission.

Idaho has continued to address the use of adoption savings funds. A strategic plan was developed to have a more comprehensive service array for this population to supplement services to support post-adoption, post-guardianship, and positive permanent outcomes for children at risk of entering care, as well as other IV-B /IV-E services.

In FFY 2021, CFS will:

- Continue to use funds and allow social workers, adoptive families, and guardianship families, to access post-permanency funding to provide services, activities and supports to meet identified needs. The process includes an application and provides clear guidance in accessing and using funding for social workers and resource families.
- Use funds to support parents and caregivers in accessing substance use disorder (SUD) treatment to safely care for their children and prevent entry into foster care and/or assist in reunification efforts.
- Use funds to support permanency achievement for children in care in order to provide services and funds to assist in permanency efforts such as home studies or targeted recruitment services.
- Use funds to support a case management service contract to provide support to families and children on post-permanency cases.

Anticipated CFS budget spending categories for FFY 2021 are reported in Table 4.6.

Table 4.6 Adoption Savings Budget FFY 2021

Service	FFY 2021	Percentage	Category/Population
<ul style="list-style-type: none"> <li>• Post Adoption Grants</li> <li>• Case Management Contracted Services for Post Adoption or Post Guardianship Cases</li> </ul>	\$258,300	70%	Post-Adoption or Post-Guardianship Services
<ul style="list-style-type: none"> <li>• Substance Abuse Treatment Services</li> </ul>	\$ 36,900	10%	Services for Children at Risk of Foster Care
<ul style="list-style-type: none"> <li>• Services to support achievement of permanency for children in foster care</li> </ul>	\$73,800	20%	Other Title IV-B or Title IV-E Allowable Services
<b>TOTAL</b>	<b>\$369,000</b>		

## (5) CONSULTATION AND COORDINATION BETWEEN STATES AND TRIBES

### Background

Tribes living within the boundaries of the State of Idaho are the Coeur d'Alene Tribe, the Kootenai Tribe of Idaho, the Nez Perce Tribe, the Northwestern Band of the Shoshone Nation, the Shoshone-Bannock Tribes and the Shoshone-Paiute Tribes.

The Child and Family Services (CFS) program and tribal program staff have become increasingly active and successful in ongoing collaborative efforts to access, coordinate, and enhance services for tribal children and families and reservation service areas in Idaho. Much of this work is accomplished at local worker-to-worker and office-to-office levels, rather than at a government-to-government level. This type of communication, coordination, and collaboration is most often related to routine case management issues on cases where jurisdiction is shared or where the state has custody and the tribe has intervened.

The Indian Child Welfare Advisory Council (ICWAC) is designated, by agreements, as a forum for ongoing tribal technical support and review. The group meets on a quarterly basis. The roles of the Idaho Department of Health and Welfare executive leadership and tribal leadership can include either attending meetings or reviewing meeting minutes. All Idaho tribes are invited to attend the ICWAC meetings. In FFY 2020, members of the Coeur d'Alene Tribe, the Nez Perce Tribe, the Shoshone-Bannock Tribes, and the Shoshone-Paiute Tribes participated in meetings along with representatives from CFS and Casey Family Programs.

### State Collaboration in the Development of the Child and Family Services Plan (CFSP)

In FFY 2019, information was shared with the Idaho Indian Child Welfare Advisory Council (ICWAC) at two separate meetings related to Idaho's current performance. Input was sought as to the identification of needs and ideas for addressing those needs from ICWAC members for the 2020-2024 CFSP. A suggestion was made to analyze ICWA data to identify out-of-state tribes frequently connected to children in Idaho's foster care system for the purpose of collaborating with those tribes. On April 2, 2019, Michelle Weir, the CFS program's Child Welfare Policy Program Manager, and Stephanie Miller, Child Welfare Policy Program Specialist, met with Charles Henry, Coeur d'Alene Tribal Social Services Indian Child Welfare (ICW) Manager and Joni Williams, Child Protective Services Supervisor from the Nez Perce Tribe. During this meeting, input as to CFS's performance in the previous year, ideas for the 2020-2024 CFSP were identified, and activities to be prioritized were discussed. A priority area of interest was the development of the Nez Perce Tribe's child welfare program as supported by the new IV-E tribal agreement and the Coeur d'Alene Tribe's interest in developing a IV-E tribal agreement. Prior to the meeting, CFS e-mailed a link to a copy of the 2019 APSR. These priorities were built into the 2020-2024 CFSP.

To support the integration of collaboration between the CFS program and tribes into child welfare processes while highlighting the additional attention necessary to ensure active efforts are made,

goals related to State-Tribe collaboration are located under “Plan for Enacting the State’s Vision”; specifically, in Goals 4 and 5.

In FFY 2020, CFS shared information related to performance with the ICWAC on an ongoing basis. Updates as to progress made and next steps on key activities included in the CFSP, Child and Family Services Review (CFSR) Program Improvement Plan (PIP), and Child Welfare Transformation (CWT) Initiative were discussed at each meeting. Idaho tribes expressed interest in Qualified Expert Witness training which was identified as an activity to be addressed through the ICWAC. In February 2020, CFS began planning to meet with each tribe at the National Indian Child Welfare Conference to be held in Denver, Colorado in March 2020 to discuss the First Annual Progress and Services Report (APSR). These plans had to be canceled when the conference was moved to an online platform due to COVID-19.

COVID-19 precautions prevented CFS from completing annual spring visits to Idaho tribes. In May 2020, Michelle Weir, CFS Child Welfare Policy Program Manager and Stephanie Miller, Program Specialist, met with Charles Henry, Coeur d’Alene Tribal Social Services Indian Child Welfare (ICW) Manager via video conference. In June 2020, Stephanie Miller met with Joni Williams, Child Protective Services Supervisor from the Nez Perce Tribe via video conference. At each meeting, CFSP Goals, progress made, and next steps were reviewed, and tribal updates were shared. As reflected in updates to Goal 5.2, the Coeur d’Alene and Nez Perce Tribes are interested in working with CFS to update the centralized ICWA notification process and documents. Each Tribe further identified next steps in the implementation (CFSP 6.1) and development (CFSP 6.2) of State-Tribe Title IV-E Agreements, which are reflected in goal updates. In addition, the Nez Perce Tribe is interested in learning more about the use of Professional Resource Family Development Plans (PRFDPs) (CFSP 1.2) and documents CFS is using to support the implementation of Case Consultation (CFSP 1.1).

At the ICWAC meeting in May 2020, multiple Idaho tribes reported just beginning to re-open their social services offices after being closed due to COVID-19. Invitations for video conference meetings to discuss the APSR have been sent to the Shoshone-Bannock Tribes, Shoshone-Paiute Tribe, Kootenai Tribe, and Northwestern Band of the Shoshone Nation; however, responses have not yet been received. Efforts to complete individual tribal visits continue to be made.

## 422 Protections

The State of Idaho is responsible for the 422 protections for children and families who fall outside the boundaries of tribal lands when children are in the state foster care program.

In FFY 2020, CFS met with the Coeur d’Alene tribe over video conference. A face to face meeting did not occur due to COVID-19 precautions. The Coeur d’Alene Tribe is providing the 422 protections to the children and families they serve. The tribe reported their social services program utilizes a spreadsheet database to record demographic information for the children and families they serve. Older children are involved with developing the case plan. Health and education records for children are stored in case files and provided to resource parents, courts, and others as appropriate.



A video conference was held between a CFS program specialist and the Nez Perce Tribe in June 2020 at which time it was confirmed the Nez Perce Tribe is providing the 422 protections to the children and families they serve. The tribe reported their social services program does not have a child welfare information system, but their spreadsheet database system is meeting their needs to document the demographic information of the children and families they serve. The Nez Perce Tribe has a tribal court and presiding judge to conduct six-month reviews and permanency hearings. Children participate in the case planning process beginning at age 14. Younger children participate depending on their development and desire to be involved in planning. The health and education records of children are kept in a case file, and the information is provided to resource parents and court as appropriate.

As previously noted, CFS continues to make efforts to meet with the Northwest Band of the Shoshone Nation, Kootenai Tribe of Idaho, Shoshone-Bannock Tribes, and Shoshone-Paiute Tribe. Meetings will be used to confirm 422 protections. Below is the most recent 422 protection verification for each of these tribes received through face-to-face and phone discussions in FFY 2018.

The Shoshone-Paiute Tribes are providing the 422 protections to the children and families they serve. The tribe reported they have considered purchasing an information database system but have not found one to meet their needs that is cost effective. Currently, they keep a spreadsheet database that is meeting their needs to document the demographic information of children and families. They reported they have a contract with a judge who comes to their reservation monthly to provide judicial review of their tribal social services cases. They provide a "notice of custody" document for schools and resource parents to give them a summary of a child's education and health information. Resource parents are invited to attend court hearings and report to the court how children are doing at the six-month review hearing.

The Executive Director of the Northwest Band of the Shoshone Nation reported their tribe allows states to provide the 422 protections as they do not have a social services program. They also reported that within their enrollment database they can make "note" and identify if a child has been placed in foster care, guardianship, or has been adopted. When a child is in foster care they intervene in state court to become a party to the case to ensure the child is kept safe and their cultural and ethnic heritage is maintained.

The Finance Director of the Kootenai Tribe of Idaho, stated their tribe provides for many of the 422 protections. They do not have a computer database system, but keep files with the demographic characteristics, location, goals and status for children who are removed from their homes. The tribe has a tribal court that hears child protection cases twice per month. Case plans are developed with the family and child through the court system. In discussing all the 422 protections, they reported the tribe does not need any assistance from the state to provide for tribal children or families.

The Shoshone-Bannock Tribes indicated during previous conversations in past years that they are providing for all the 422 protections.

### **ICWA Compliance**

The Child and Family Services (CFS) program monitors and assesses its compliance with ICWA requirements through specialized case record reviews (CRRs). CFS will invite Idaho tribes to participate in the next ICWA CRRs which will occur in FFY 2021. CRR outcomes will be analyzed in conjunction with outcomes from the previous ICWA CRRs. CFS will work with Idaho tribes to develop an ICWA program improvement plan (PIP) to address identified issues. CRR data, in conjunction with other case record information, will be utilized to identify out-of-state tribes with whom children in Idaho's foster care system are connected.

### **Chafee Foster Care Plan (CFCP) Tribal Collaboration**

The state agency continues to partner with each tribe residing in Idaho to make the full array of independent living (IL) services available to tribal youth. The Child and Family Services (CFS) program works with tribes on a local and program-to-program level. Consultation is defined as a formal process in Idaho, meaning government-to-government, and is not utilized for IL service provision purposes. CFS staff are available to support and train tribal social services staff about the Independent Living Program (ILP). Idaho tribes receive information regarding Idaho's ILP through the Child Welfare Program and Policy Development Manager, policy program specialists, and at regular Indian Child Welfare Advisory Committee (ICWAC) meetings. Benefits and services under the program will be available to Indian children in Idaho on the same basis as to other children in the state, including credit reports for minors in foster care.

In keeping with the requirements of the Chafee Foster Care Program (CFCP), section 477(b)(3)(G), Idaho will negotiate in good faith an agreement with any tribe that does not receive direct CFCP or Education and Training Voucher (ETV) allotments. CFS will ensure benefits and services under the programs will be made available to Indian children in the State on the same basis as to other children in the State. Currently, all tribes access CFCP and ETV funds by sending referrals to CFS.

Program-to-program tribal staff have continued to identify the following concerns related to barriers to accessing IL services: access to appropriate resources, planning and utilizing funds, and lack of training opportunities to better understand IL services.

During FFY 2019, CFS received requests from the Nez Perce and Shoshone-Paiute Tribes through our application process for IL and ETV services for tribal youth; however, this is an area that needs additional attention this coming year to help refine the application process and services. There have been additional requests for trainings and presentations regarding IL services and supports, which will be facilitated FFY 2020.

### **CFSP/APSR Exchange**

The CFS program will provide copies of the First Annual Progress Report to the 2020-2024 Child and Family Services Plan to Idaho tribes via e-mail upon final approval by the Children's Bureau. Hard copies will be provided upon request.

## (6) JOHN H. CHAFEE FOSTER CARE PROGRAM FOR THE SUCCESSFUL TRANSITION TO ADULTHOOD (THE CHAFEE PROGRAM)

The Idaho Department of Health and Welfare (IDHW), Division of Family and Community Services (FACS), Child and Family Services (CFS) program is responsible for the administration and oversight of the programs carried out under the Chafee Foster Care Program (CFCP) State Plan.

### Program Design and Delivery

#### Assessment

Paramount in the process of assisting youth to achieve self-sufficiency and the overall goals of the state program, is an assessment of each eligible youth's needs relative to their readiness to live independently. CFS uses the Casey Life Skills Assessment (CLSA) as the mandatory instrument for this purpose. Each youth who is eligible for independent living (IL) services, including tribal youth, participate in a CLSA of their needs prior to the provision of services or use of any funds awarded to the state by the Chafee Foster Care Program (CFCP). The youth, as well as their family, resource parents, child welfare professionals, and others having knowledge of a youth's preparedness for living independently, including tribes, are encouraged to participate in the assessment process. It is anticipated that by conducting a consistent, comprehensive assessment of a youth's independent living needs, the state and tribal programs will be more likely to target services that have a meaningful impact on the success of these youth as they prepare for living independently.

#### Independent Living Plan

Upon completion of this assessment, a youth-driven IL plan is developed for all eligible youth, including tribal youth, placed in out-of-home care who are at least 14 years of age or older. This plan, created in collaboration with the youth and other individuals familiar with the youth, includes specific goals and objectives to be achieved. The result is that all eligible youth in out-of-home placement have a distinct, individualized IL plan designed to help prepare them to make the successful transition from foster care to a self-sufficient adulthood. This also helps assure youth participating in the state program have a comprehensive plan that encourages the inclusion of those individuals likely to be a long-term natural support system and facilitate the likelihood of successfully completing their plan. The youth's assessment and plan are updated on an annual basis or more frequently if the youth's circumstances change.

With the development of Idaho's new Comprehensive Child Welfare Information System (CCWIS), the IL plan has been revamped to include the seven Integrated Transition Practice Framework (ITPF) domains. By using this framework, social workers are able to create a more targeted plan with youth addressing specific domains that contribute to successful transitions to adulthood. This will assist CFS in having more consistency across the state with the formatting of individual IL plans.

### **Foster Youth Involvement**

Regional foster youth advisory boards exist in five of the seven regions and provide an organized venue for youth to convene, connect, and advocate for topics of concern that impact youth in foster care. Support to form a board for the two regions who lack a board will continue to be a focus. Due to small numbers of older youth in these regions and a large rural demographic, Regions 2 and 7 find it difficult to organize a youth board. Advisory board groups create opportunities for youth to develop leadership skills and have opportunities to speak on issues that relate to youth in foster care in their local areas. Statewide, the Idaho Foster Youth Advisory Board (IFYAB) exists to bring together the exceptional youth from each regional board to serve as advocates at the state level and represent the voice of the regional board. Five of seven regions in Idaho have at least one youth representative on the IFYAB.

During FFY 2019, members of the IFYAB were invited to and participated in Idaho's Family First Visioning Council and workgroups. Attendees were provided with an overview of the Family First Prevention Services Act (FFPSA) and goals for developing an implementation plan. Attendees were then asked to participate in round-robin style groups to address barriers and draft recommendations for an implementation plan. IFYAB members were invited to participate in the workgroups to further refine the drafted goals and objectives as well as to develop strategies and recommendations. CFS is also able to use feedback loops through regular IFYAB meetings to gather input from foster youth and foster youth alumni in Idaho.

The board also focuses on public education issues from the youth's perspective, development of new state policies that would better serve youth in foster care and hope to be the youth voice in new and existing child welfare policy moving forward. IFYAB members participate in advisory and educational speaking engagements as requested by internal and external partners and stakeholders including the Court Improvement Project, the Governor's Task Force for Children at Risk, and the Idaho State Legislature Committees. Key advisory goals include collaborating and assisting CFS with the following: finalizing the Sibling Bill of Rights; LGBTQ+ practice policy; Chafee plan and annual review; Idaho IL website; and implementing the FFPSA.

The IFYAB meets monthly with the state IL program specialist. There are targeted discussions throughout the year with IFYAB and CFS on needs and goals which inform Idaho's Chafee program and plan. IFYAB provided feedback on strengthening program practice requirements on sibling placements and connections and providing support to older youth in transitioning to adulthood. Over the next year, CFS will continue to work with IFYAB on goals for Chafee program improvements and implementation of the CFSP and other CFS and FACS plans.

During FFY 2019-2020, IFYAB made changes and updates to their bylaws and structure and have continued to work with the CFS IL program specialist to develop goals and strategies for their board. In addition to this, IFYAB has been instrumental in providing feedback to CFS on strengths and areas for improvement which are being addressed through the redesign efforts and Child Welfare Transformation (CWT) plan. One of the areas the IFYAB and CFS will focus on is on incorporating the Positive Youth Development (PYD) Framework into CFS Chafee program over FFY 2020-2021. CFS will also be exploring the use of extended foster care, which would require

extensive change to current statute, rule, and policy. This area of practice is a topic that excites our IFYAB members and is something CFS will lean on the experience/feedback from IFYAB members' experience as we develop this practice. CFS is also working with an advocacy group regarding LGBTQ+ youth in foster care and are developing policy. IFYAB members will be used to help finalize this policy and standard of practice.

In updating Idaho's Chafee plan information was sought from IFYAB to inform the plan and provide feedback and was incorporated. The following feedback was provided from IFYAB on the Chafee plan:

- Independent Living Plan - IFYAB would like to see additional growth for caseworkers to ensure they regularly follow-up with the youth on the progress made towards goals/tasks identified on the individual plan. They felt this follow-up could include not only knowing the goal/task are complete but also how the youth feels about the progress made.
- NYTD - IFYAB noted youth feedback included the need to have a transition plan between workers so that services, such as the NYTD services outlined in the Chafee plan, do not get lost. Additionally, ensuring workers are fully discussing with youth what services are available might increase the percentage of youth engaging in these services. Having youth new to IL meeting with, and hearing directly from, youth impacted by specific NYTD services could increase participation.

Chafee Training – IFYAB felt it would be important to include youth feedback in foster parent training to help foster parents understand what services are available to youth who are placed in their home. This may help foster parents advocate on behalf of the youth to receive IL services.

### NYTD

The CFS program shares results of NYTD data with staff on a regular basis. Additional work is needed to ensure information is also shared with families, children, youth, tribes, and courts to ensure data is informing the improvement of service delivery. CFS has continued to meet and pass NYTD submissions and plans to review and enhance data collection as part of efforts to update the information management system (CCWIS).

Table 6.1 Percent of Youth Receiving Independent Living Services by Type of Services FFY 2019

Region	Number Served	Independent Living Needs Assessment	Academic Support	Post-Secondary Education Support	Career Preparation	Employment Program or Vocational Training	Budget & Financial Management	Housing Education & Home Management Training	Health Education & Risk Prevention	Family Support & Healthy Marriage Education	Mentoring	Supervised Independent Living	Room & Board Financial Assistance	Education Financial Assistance	Other Financial Assistance
1	98	100%	73%	63%	69%	0%	65%	76%	76%	81%	31%	21%	0%	65%	22%
2	23	100%	91%	61%	65%	0%	57%	57%	57%	83%	48%	17%	0%	70%	30%
3	117	89%	78%	18%	36%	1%	36%	15%	22%	23%	17%	4%	10%	15%	4%
4	139	93%	65%	12%	37%	0%	17%	25%	34%	32%	29%	6%	2%	14%	8%
5	70	96%	39%	40%	44%	0%	50%	37%	30%	21%	83%	1%	6%	31%	3%

6	68	100%	62%	22%	38%	0%	53%	26%	35%	24%	50%	1%	4%	35%	9%
7	61	95%	25%	5%	20%	0%	13%	8%	8%	8%	85%	7%	0%	23%	13%
All	579	95%	62%	28%	42%	0%	39%	33%	36%	35%	43%	8%	4%	31%	11%
Source: ICARE, retrieved 12/6/2019															

During FFY 2020-2021, Idaho will complete a survey and/or hold a focus group with families, children, youth, tribes, courts and other partners asking for ideas of effective ways to receive NYTD data. The CFS program will use the findings from these survey/focus groups as ways to both share data and inform utilization of data to improve service delivery. After completing these surveys, CFS will utilize the data collected to inform and better understand our lower percentage areas of service categories. CFS would also like to engage in collaborative work with other states to help define the NYTD services area for consistency.

### Service Array

The services described below are designed to assist youth in transitioning to self-sufficiency:

**Family and Support Persons Involvement** - Services to involve the biological parents and, if appropriate, extended family members, resource parents, and other relevant parties, including Indian tribes, in the development of the youth's IL plan and services.

**Life Skills** - Counseling and instruction in basic living skills such as money management, home management, consumer skills, decision-making, time management, parenting, health care, access to community resources, transportation, leisure activities, and housing options, including coordination of resources and development of contracts with appropriate service providers.

**Educational and Vocational** - Educational and training funds as needed to ensure completion of educational programs that would result in obtaining employment. Counseling and other assistance related to educational and vocational training (including preparation for a General Equivalency Diploma (GED), high school graduation, vocational education, and higher education) and the coordination of resources and development of contracts with appropriate service providers.

**Education and Training Vouchers (ETV)** - The ETV program is administered through collaboration between a child welfare policy program specialist and regional IL coordinators. The ETV is utilized to meet the post-secondary educational and vocational training needs of youth served through the CFCP. A maximum of \$5,000 per youth per year may be utilized in assisting a youth attend a post-secondary educational or vocational training program as defined in the Higher Education Act.

**Employment** - Counseling and other assistance related to employment, such as job readiness training, job search assistance, and employment placement programs, and the coordination of resources or development of contracts with the Idaho Department of Employment, the Private Industry Councils, Vocational Rehabilitation, and other employment service providers, including tribal employment and training programs.



**Human Sexuality Issues** - Counseling, education, and other assistance related to human sexuality issues, such as reproductive health, abstinence programs, family planning and pregnancy prevention, sexually transmitted diseases, and avoidance of high-risk sexual behaviors. CFS provides educational opportunities to foster parents to help them understand sexuality issues facing some of the youth in their care.

**Counseling** - Counseling and other assistance related to self-esteem, interpersonal relationships, permanency planning, and social skills development, such as individual, family counseling, group counseling, and issues that are of cultural relevance.

**Age or Developmentally-Appropriate Activities** - CFS has continued to collaborate with state, public, and private entities and stakeholders in ensuring opportunities for youth to engage in age or developmentally-appropriate activities.

**Driving Privileges** - CFS assists in reimbursing a licensed resource parent for the cost of vehicle insurance for a foster child to create an avenue for youth to drive while in foster care. This encourages life skills and normalization of eligible children in foster care by allowing them to become drivers while in foster care where they have family support and direction as young drivers. Youth in foster care often miss out on opportunities to be employed or participate in school activities because resource parents do not have the means to get them to and from these activities. Allowing youth to drive will allow them more access to these normalizing activities. Additionally, youth in foster care list driving as one of the top three factors of a successful transition to adulthood.

**Self-Sufficiency** - Provision of other necessary services and assistance designed to improve a participant's opportunities to transition to self-sufficiency successfully.

**Outreach** - Establishment of a system of outreach which would encourage youth currently in foster care to participate in the independent living program.

**Increasing Services** - Ongoing development of community organizational efforts aimed at increasing available services to youth.

**Support Networks** - Development of ongoing support networks for youth leaving foster care including contracted services and involvement of the youth's natural support system.

**Medicaid Coverage** - Idaho extends Medicaid coverage to youth who age out of foster care until their 26<sup>th</sup> birthday using the state's Children's Health Insurance Program (CHIP). At this time, Idaho has chosen to only extend coverage to youth who have aged out of Idaho's foster care system. Staff, former foster youth, current foster youth, community agencies, and local benefits offices across the state were provided information via email and social media regarding how the federal Affordable Care Act helps former foster youth, how to qualify and apply, what information is needed, and provided several resources for additional information.

**Trust Accounts** - The Child Welfare Funding Team (CWFT) monitors/manages funds for children in foster care who receive either Social Security benefits (SSI/SSA/SSDI), child support dollars from obligated parents, or insurance or court settlements. These funds are used to offset the child's cost of foster care. Any monies left over after the child leaves care and after all outstanding expenses are paid are returned to the youth. No other trust accounts are used for independent living.

**Room and Board** - Room and Board funds are provided for room and board for youth who left foster care because they attained 18 years of age but have not yet attained 21 years of age. No more than 30% of the state allotment of CFCF funds will be used for room and board. Room and board is defined as those expenses which assist eligible youth, including Indian youth, to secure adequate housing and other necessary household items which promote the goal of self-sufficiency. IL room and board funds may be used for, but are not limited to, the following:

- Rent payments
- Security, cleaning, and similar deposits
- Costs related to household utilities
- Food and Nutrition
- Other household goods and supplies which are essential for a youth's health, safety, or well-being
- Housing-related expenses essential to attend an institution of higher learning, vocational programs, or comparable educational setting

This is an area of practice requiring more targeted education to regional staff and IL coordinators. As noted in our NYTD data table, Room and Board is an underutilized service. During FFY 2020, CFS will use monthly IL coordinator calls where topics, such as Room and Board underutilization, will be addressed. Additionally, Room and Board is a service that CFS would like brought to the attention of youth at their Transition Planning Meeting held 90 days prior to their 18th birthday. This will enable more targeted services for youth who age out of our system.

**Foster Youth to Independence** – This program is newer to CFS and will be area for exploration and collaboration with stakeholders to further develop.

**Transition Planning** - Idaho foster youth are provided with an initial transition planning meeting within 60 days before or after their 17<sup>th</sup> birthday, and a final transition planning meeting within 90 days of their 18<sup>th</sup> birthday. This meeting is used to assess the youth's readiness, resources and skills and to connect the youth with the services they need to make a successful transition to adulthood.

**Pregnant and Parenting Youth** – CFS incorporates services and referrals for youth who are pregnant or already parenting in areas of family planning, nutrition, health, and parenting education. Additional services are also being identified through Idaho's implementation of FFPSA.

## Serving Youth Across the State

The Independent Living Program (ILP) in Idaho has been a state-administered and state-delivered program since its inception in 1987. The program has served, and will continue to serve, eligible youth in all geographic areas of the state. Youth who move from one region to another will be served by the region in which the youth currently resides. Any youth for whom the state is legally responsible regarding placement and care, and who satisfies the State of Idaho's criteria for independent living (IL) eligibility, may be served through the program. In keeping with the CFCP, Indian youth for whom a tribe is responsible for placement and care, and who satisfy the eligibility criteria may be served. Youth who are dually committed through an expansion of the Juvenile Justice Act and are not in a detention facility or hospital setting, may be served if they meet the eligibility criteria.

Idaho divides the state into three hubs (North, East, and West) containing seven regional areas. The North Hub consists of Regions 1 and 2, the West Hub consists of Regions 3 and 4, and the East Hub consists of Regions 5, 6, and 7. Each region is allocated a budget to address IL needs based on the population of IL eligible youth the region serves. During FFY 2019, there were 126 youth eligible for services in the North Hub. Of those, 112 received assessment, IL planning and/or services paid through CFCP. There were 271 youth eligible for IL services in the West Hub. Of those, 235 received assessment, IL planning and/or services paid through CFCP. The East Hub had 194 youth eligible for IL services. Of those, 182 received assessment, IL planning and/or services paid through CFCP.

## Serving Youth of Various Ages and Stages of Achieving Independence

**Youth 14-18 years of age in foster care** - CFS provides IL services to eligible youth beginning at 14 years of age. To meet this criterion, CFS has established a standard of 90 cumulative days of foster care placement after the youth's 14<sup>th</sup> birthday. Engaging youth earlier recognizes the inherent risk factors of developmental and ongoing trauma experienced by children and youth who enter the foster care system. By initiating IL services for youth younger than age 16, more time is available to provide services and prepare youth for successful transition to adulthood. Services to youth in the 14 to 18 age range include all the services noted in the IL plan, except for room and board. Services are initiated with a formal assessment of the youth's readiness for self-sufficiency. Following the assessment, an IL plan is developed to support the eligible youth in acquiring the knowledge, skills, and resources necessary to make a successful transition to adulthood. These services are provided by resource parents, parents, child welfare professionals, tribal social service programs, or private and public partners. Planning and implementation of the IL service plans are youth-driven to assure that they are invested in and take ownership over their own goals and successes. This age group has the entire range of services noted earlier in the plan.

**Youth 18-21 years of age** - For youth ages 18 through 21, CFS provides IL services to eligible youth, including Indian youth, who have experienced a foster care episode between the ages of 14-18. Youth in this age range may receive the full array of IL services described below, including room and board payments to resource parents for youth between ages 18 and 19, if they are completing secondary education, and room and board funds if they exited foster care at age 18.

Services to older youth may be delivered by a wide range of service providers such as state agency staff, tribal social service programs, and community partners or youth service contractors. Youth in this age group will receive voluntary services beginning with assessment and planning for their needs.

**Youth 18-21 years of age with legal permanency** - If a youth is found eligible for IL services during a foster care episode and subsequently reaches legal permanency status of reunification, adoption or guardianship, the youth remains eligible for IL services until age 21. Room and board services are available only to those eligible youth, including Indian youth, who have aged out of foster care upon reaching the age of 18 years but have not yet reached the age of 21.

**Youth 18-26 years of age with legal status of adoption or guardianship prior to age 16** - Education and Training Vouchers (ETV) are available to youth who meet the eligibility requirements, and who have completed secondary education. IL eligible youth with a legal permanency status of adoption or guardianship prior to their 16th birthday are not eligible for ETV per section 477(i)(2) of the Social Security Act.

### **Collaboration with Other Private and Public Agencies**

To help youth achieve self-sufficiency and independence, the CFS program will continue to consult and collaborate with public and private entities including university partners, the Idaho State Board of Education, the Department of Education, Casey Family Programs, the Idaho Court Improvement Project, law enforcement, all federally recognized tribes in Idaho, legislators, professional child welfare workers, regional and central office child welfare program managers, health care providers, legal services, foster youth and foster youth alumni, housing providers, substance abuse treatment providers, judges, juvenile justice, Idaho's children's mental health program, and public education providers.

**Casey Family Programs** - CFS's partnership with Casey Family Programs continues to flourish. Casey Family Programs has staff assigned to provide transitional services to youth. In turn, the commitment of Casey staff is used as an in-kind match towards Idaho's CFCP funding allocation.

**State Board of Education** - CFS continues to partner with the Idaho State Board of Education regarding Idaho's Educational Training Voucher (ETV) Program with an intended goal of assisting youth in making the best educational choices when they apply for ETV funds. Information is distributed to regional independent living and tribal social service staff through the state's IL or ETV Coordinator about all of Idaho's institutions of higher education and entrance requirements.

**Idaho Department of Education** - The IL or ETV coordinator participates on the Idaho Department of Education's Secondary Transition Council and shares information about secondary transition with regional staff as well as Casey Family Programs and tribal staff. Locally, state and tribal social services staff, in addition to private agencies providing independent living services, collaborate with each youth's school program to coordinate plans for transition and education.

**Homelessness Prevention** - CFS has collaborated with local and state agencies including the Idaho Housing and Finance Association (IHFA). The IHFA is the recipient of the majority of homelessness assistance funds awarded to Idaho and is responsible for the grant administration and oversight of these programs. Homeless assistance funds are used to support a comprehensive and coordinated crisis response system that includes emergency shelters, transitional housing, rapid re-housing and permanent supportive housing. Funded programs include a Continuum of Care (CoC), Emergency Solutions (ESG), and Housing Opportunities for Persons with AIDS (HOPWA). CFS has partnered with the IHFA to share information about youth systems of care in Idaho as IHFA is focused on ending homelessness for youth 18-24 who are aging out of foster care or are otherwise homeless. Part of the CoC's goal is to link youth populations who may become (or are at greater risk of becoming) homeless with local housing and service providers. CFS provides a statewide perspective and advocacy for Idaho's youth population in many of these groups.

In alignment with the Fostering Connections to Success and Increasing Adoptions Act of 2008, the Idaho IL Program provides transition planning meetings for youth 60 days before or after a youth's 17<sup>th</sup> birthday, and within 90 days of the youth's 18<sup>th</sup> birthday. The purpose of the transition planning is to assess the youth's readiness, resources, and skills to successfully navigate adulthood, as well as to ensure that the youth has services and supports in place to do so. Housing needs and youth goals regarding housing are addressed during these meetings, and a plan is developed. Youth are provided with information regarding the resources available to them as they prepare to exit the foster care system which includes the following:

- Room and board payments through a voluntary placement agreement in their foster placement to complete secondary education
- Room and board assistance either through an independent landlord or rental agency or through participation in a youth serving organization such as Bannock Youth Foundation, Mana Youth Services, or JemFriends

In addition to direct financial services, youth are required to engage in assessment and independent living planning to access housing assistance. The intent is to ensure that youth have ongoing case management and supportive services to have the resources necessary to make informed decisions about self-sufficiency. Wraparound services to support their housing stability such as money management, managing conflicts, tenant adequacy, etc., can be identified as a barrier to stability through assessment and independent living planning.

**Sex Trafficking** - With regard to the requirement in section 471(a)(9)(c) of the Social Security Act, CFS has developed, in consultation with partners, policies and procedures for identification, documentation and determination of appropriate services for those at risk and victims of sex trafficking. CFS has met the requirements through a variety of meetings with local specialist in trafficking, collaboration with a variety of community agencies, and development of collaborative policies that address sex trafficking of youth in foster care.

In accordance with the provisions in section 103(10) of the Trafficking Victims Protection Act of 2000 (TVPA) (22 U.S.C. 7102)); (section 106(b)(2)(B)(xxiv) of CAPTA), CFS is adhering to the identification and assessment of all reports involving children known or suspected to be victims of sex trafficking. Upon receipt of a referral relating to child abuse and neglect in which the children are known or suspected to be the victims of sex trafficking, the referral reason will be categorized as such and will be assigned for assessment. The established requirements for response are identified within the following Child Welfare Standards Priority Response Guidelines and Identifying, Documenting and Determining Appropriate Services for Child Victims of Human Trafficking. CFS is adhering to the training of CFS workers in identifying, assessing, and providing comprehensive services to children who are sex trafficking victims as outlined in the Standard for Responding to and Reporting on Runaway Youth and Standard for Identifying, Documenting and Determining Appropriate Services for Child Victims of Human Trafficking.

Children/youth identified as sex trafficking victims are reported to law enforcement within 24 hours and are referred to local community providers and supports for assessment and treatment planning. Service needs identified and provided are documented within the child/youth's service plan. CFS social workers collaborate with community service providers to ensure continuity and quality of services as well as progress towards addressing the child/youth's needs.

**Pregnancy Prevention** - CFS partners with local and state agencies to increase awareness and prevention surrounding teen pregnancy and disease prevention. One such partnership includes participation on the Sexual Health Information Education Advisory Board (SHIEAB) of the Central District Health Department. The purposes of the SHIEAB include providing an opportunity for participation in the development, implementation, and evaluation of the project by persons broadly representative of all significant elements of the population to be served and by others in the community knowledgeable about the community needs for reproductive health services. The board serves as a community liaison.

### **Eligibility for Benefits and Services – IL Program**

The eligibility criteria for a youth's participation in the Independent Living Program (ILP) was developed through a process of consultation and public input. Emphasis was placed on services to those youths most likely to remain in foster care until their 18<sup>th</sup> birthday. The CFS program requires that a youth be in a foster care placement for 90 cumulative days, an indicator they will more likely be in care long term and need additional assistance in attaining self-sufficiency.

Eligibility requirements for independent living services are as follows:

1. A youth must be, or have been, the responsibility of the State or Indian tribe either through a court order or voluntary placement agreement with the child's family;
2. Only youth between the ages of 14-21 years of age are eligible for services and use of funds through the independent living program;
3. Youth must have resided in an eligible placement setting which includes foster care, group care, Indian boarding schools, or similar foster care placement, and excludes detention facilities, forestry camps, or other settings primarily designed for services to delinquent youth; and



4. A youth must have resided in an eligible foster care setting for 90 cumulative days after attaining the age of 14.

### Cooperation in National Evaluations

CFS assures that, as the state agency responsible for the implementation of the independent living program in Idaho, it will cooperate with national evaluations of the effects of the independent living program implemented to achieve the purposes of the CFCP (Section 477(b)(2)(F)).

### Chafee Training

CFS social workers receive initial and ongoing support in developing an understanding of and the skills necessary to address the goals and objectives of Idaho's CFCP. New CFS staff are familiarized with the history and details of the CFCP plan. They are also provided with an opportunity to interact with and learn from current and former foster youth through a youth panel incorporated as part of the training. The Working with Older Youth session of CFS New Worker Academy is taught in collaboration with embedded trainers, regional IL coordinators, and IFYAB members. Ongoing training and supports are provided through regional IL coordinators and in-service training courses by a child welfare policy program specialist, regional IL coordinators, and embedded trainers as requested.

Resource parents receive PRIDE pre-service training prior to becoming licensed to provide care for children and youth in foster care. Prospective foster parents receive training which aligns with the goals and objectives of the CFCP, such as developmental needs and continuing family relationships. During the final PRIDE session, prospective resource parents are provided with an opportunity to ask questions of youth on a panel which includes one or two members of the IFYAB. The panel shares their foster care experiences from the youth's perspective. Licensed resource parents receive additional training on CFCP goals through other training opportunities on how to ensure normalcy for children and youth in foster care. Training will continue to include information on the purposes and philosophy of the ILP, participation requirements, implementation, measurements of success, outcomes, and all other aspects of the program that allow youth to make a smooth transition from foster care to self-sufficiency.

### Education and Training Vouchers (ETV) Program

Educational Training Vouchers (ETV) are available to youth who are eligible for services under Idaho's Independent Living Program (ILP).

1. Youth are eligible for ETV until they turn 26 years old; as long as they are enrolled in a post-secondary education or training program and are making satisfactory progress toward completion of that program. ETV are available to youth who are eligible for services under Idaho's ILP.
2. ETV are available to Indian youth who are currently in tribal custody or who have been in tribal custody and meet ILP eligibility criteria through the regional IL Programs.
3. A maximum of \$5,000 per year, or the total cost of attendance at an institution of higher education, may be used for attendance at an institution of higher education. The total

amount of the award and any other federal assistance will not exceed the cost of attendance.

4. A youth may participate in the ETV program for no more than five (5) cumulative years.
5. Prior to the expenditure of ETV funds, CFS will assure that each youth completes an Casey Life Skills Assessment; develops an approved IL plan which includes the plan for achieving educational goals; defines CFS' role in supporting the youth; and completes a standardized ETV application with supporting documentation approved by the appropriate regional IL coordinator.
6. ETV funds will be used to cover costs for educational support including, but not limited to, tuition and fees, room and board, counseling related to education and training programs tutoring, books, rental or purchase of required equipment, supplies, transportation, child care, and other identified service needs to support the youth's education goals. CFS will track the use of ETV funds separately from Chafee through the child welfare information system.
7. An institution of higher education is defined as an educational institution that:
  - a) Admits as regular students, only persons having a certificate of graduation from a school providing secondary education, or the recognized equivalent of such a certificate.
  - b) Is legally authorized within Idaho to provide a program of education beyond secondary education.
  - c) Provides an educational program for which the institution awards a bachelor's degree or provides not less than a two-year program that is acceptable for full credit toward such a degree.
  - d) Is a public or other non-profit institution.
  - e) Is accredited by a nationally recognized agency or association, or if not so accredited, is an institution that has been granted pre-accreditation status by such an agency or association that has been recognized for the granting of pre-accreditation status, and it has been determined that there is satisfactory assurance that the institution will meet the accreditation standards of such an agency or association within a reasonable time.
8. The term "institution of higher education" also includes:
  - a) Any school that provides not less than a one-year program of training to prepare students for gainful employment in a recognized occupation and that meets the provision of paragraphs (1), (2), (4), and (5) of subsection (a) of the Higher Education Act.
  - b) A public or nonprofit private educational institution in any State that, in lieu of the requirement in subsection (a)(1), admits as regular students, persons who are beyond the age of compulsory school attendance in the State in which the institution is located.

### **ETV Program Operation**

ETV information is now tracked through the CCWIS, and an intra-agency SharePoint site. SharePoint allows the child welfare policy program to ensure ETV funding is being used most effectively by identifying trends such as student progress, current year in college, semester grades, student spending, and the colleges that students are attending. This gives a big picture of ETV spending and can be drilled down to look closely at local spending. This collective information

helps to build programs to assist students in college and creates avenues to reach out to former foster youth attending higher education. This also allows for annual reporting on the number of unduplicated ETVs awarded for each school year.

ETV applications are recorded in SharePoint per school year. When they are recorded, specific data is collected, reviewed, and verified including how many applications the youth has received and the cost of attendance at the institution of higher education in accordance to section 477(i)(3) and 477(i)(4) of the Act.

### **ETV Program Coordination**

CFS continues to partner with the Boise State University (BSU) Impact Scholars Program (ISP) through participating on quarterly ISP Advisory Board meetings. Topics of discussion include assessing progress towards ISP goals as well as ongoing partnership opportunities between BSU and CFS around support for ETV youth.

Youth are encouraged to take advantage of other programs such as scholarships, grants, loans, and student-work experiences as strategies to help pursue their post-secondary educational goals. Youth will be asked to apply for all available scholarships and the Free Application for Federal Student Aid (FAFSA) program website.

A child welfare policy program specialist participates in quarterly conference calls with the Idaho Fostering Success Network (IFSN). The IFSN is made up of faculty and staff at Idaho institutions of higher education as well as other community members and CFS staff who are committed to supporting Idaho's youth and alumni of foster care in higher education. The network provides resources, training and strategic planning for campuses across Idaho.

### **Chafee Foster Care plan (CFCP) Tribal Collaboration**

See Chafee Foster Care Plan (CFCP) Tribal Collaboration under the Consultation and Coordination between States and Tribes segment in this report.

## (7) STATISTICAL AND SUPPORTING INFORMATION

### Information on Child Protective Service Workforce

The following information pertains to Child and Family Services (CFS) workers and supervisors responsible for intake, screening, assessment and investigation of child abuse and neglect reports.

### Education, qualifications, and training requirements

**Education** - All case-carrying staff and their supervisors must have at least a bachelor's degree in Social Work or a (very) closely related field.

**Licensure** - Caseworkers must have a current social work license prior to employment and must be maintained during their employment. An Idaho social work license requires 20 approved continuing education units (CEUs) per year to maintain the license.

**Training** - Each new caseworker must complete Child and Family Services (CFS) New Worker Academy. Academy training includes a range of topics from laws, rules and policy, through concurrent planning and worker safety. New workers must complete each session of the pre-service Academy before they can assume full case responsibility for cases. New employees are required to complete training sessions prior to the end of their probation period. Child Welfare Social Worker 1s have nine months to complete probation requirements. Child Welfare Social Worker 2s have six months to complete probation requirements.

**Advancement** - Child Welfare Social Worker 1, 2 and 3 classifications have been developed. Child Welfare Social Worker 1 is the entry level, 2 is an experienced caseworker, and 3 is an experienced caseworker who demonstrates supervisory abilities and works closely with the supervisor to gain experience in "lead work," while still being under supervision themselves.

**Demographic information** – As of April 2019, CFS employed 279 individuals to serve the racial and ethnical needs of the children and families served in Idaho (Table 7.1).

Table 7.1 Child Welfare Staff Demographics

		Child Welfare Social Worker 1	Child Welfare Social Worker 2	Child Welfare Social Worker 3	Clinician	Child Welfare Supervisor	Total
Number of Filled Positions		20	158	39	16	46	279
Race/ Ethnicity	White	16	136	38	14	42	246
	Black	0	0	0	0	0	0
	American Indian	0	1	0	0	2	3
	Asian/ Pacific Islander	0	0	0	1	0	1
	Hispanic	4	21	1	1	2	29

Gender	Female	18	138	36	11	40	243
	Male	2	20	3	5	6	36

## Juvenile Justice Transfers

Table 7.2 Juvenile Justice Transfers FFY 2019

Region	Transfers to IDJC	Rule 16 Expansions
1	0	10
2	0	1
3	2	9
4	0	16
5	0	11
6	1	0
7	2	6
Total	5	53

Note: "Transfers to IDJC" = Count of clients in given time period with removal episode end reasons DJC Custody, Placed in DJC Custody, Placed in DJC Shared Custody, or Agency/Jurisdiction/Tribe Transfer

## Education and Training Vouchers

Table 7.3 Unduplicated Number of Youth Receiving ETV Awards

School Year	Total ETVs Awarded	Number of New ETVs
7/1/2017 to 6/30/2018	23	10
7/1/2018 to 6/30/2019	25	11
7/1/2019 to 6/30/2020	29	13

## Inter-Country Adoptions

In FFY 2019, four children entered Idaho foster care following inter-country adoption:

- Child 1 was adopted as an infant from Guatemala, the adoption agency is unknown. He was placed in foster care at 15 years of age due to neglect and has a primary permanency goal of reunification.
- Child 2 was adopted in 2013 from an orphanage in Ukraine, the adoption agency is unknown. She was placed in foster care due to neglect at age 16 and aged out of foster care.
- Child 3 is a birth sibling of Child 2. She was adopted from an orphanage in Ukraine in 2013. Child 3 entered foster care due to physical abuse and neglect at age 12. The parental

rights of her adoptive parents were terminated, and she was adopted by her non-relative foster parent.

- Child 4 was adopted from the Ukraine through the Joshua Tree Adoption Agency. She entered foster care due to neglect and abandonment six weeks after her adoption was finalized in Ukraine when her adoptive parents refused to care for her. Parental rights have been terminated and her adoption by her non-relative foster parents is pending.